01700 ARUS CORPORATE FILING SERVICE, INC (Requestor's Name) 3320 S.W. 87th AVENUE (Address) MIAMI, FLORIDA (305)552-5973 (City, State, Zip) (Phone #) LOCAL REPRESENTATIVE TALLAHASSEE OFFICE USE ONLY CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known): (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) Certified Copy Pick up time Walk in Certificate of Status Photôcopy Will wait Mail out AMENDMENTS NEW FILINGS Amendment Profit Resignation of R.A., Officer/Director NonProfit Change of Registered Agent Limited Liability Dissolution/Withdrawal Domestication Merger Other : 1000027791 REGISTRATION/ OTHER FILINGS QUALIFICATION *****78.75 *****78.75 Annual Report Foreign Fictitious Name Limited Partnership Name Reservation Reinstatement Trademark

Other

Examiner's Initials



FLORIDA DEPARTMENT OF STATE Katherine Harris

Katherine Harris Secretary of State

February 18, 1999

LAZARUS

MIAMI, FL

SUBJECT: THE TUTORING CENTER, INC.

Ref. Number: W99000004157

We have received your document for THE TUTORING CENTER, INC.. However, the document has not been filed and is being returned for the following:

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Simply adding "of Florida" or "Florida" to the end of a name is not acceptable. Please select a new name and make the correction in all appropriate places. One or more words may be added to make the name distinguishable from the one presently on file.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6934.

Loria Poole Corporate Specialist

Letter Number: 099A00007424

MULTAROGRADO TO MOLETVIO

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ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

A+ Tutoring Center, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

9600 S.W. 8th Street, Suite 38, Miami, FL 33174

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

40,000 SHARES

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Ruggieri Dario Bellido 1620 S.W. 99 Court Miami, FL 33165

ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

Isabel Grandal 1620 S.W. 99 Court, Miami, FL 33165 Ruggieri Dario Bellido 1620 S.W. 99 Court, Miami, FL 33165 Orlando Acevedo 17305 S.W. 7 Street, Pembroke Pines, FL 33029 Josefa Acevedo 17305 S.W. 7 Street, Pembroke Pines, FL 33029

ARTICLE VI DIRECTOR(S)

The name(s) and street address(es) of the director(s) to these Articles of Incorporation is(are):

Isabel Grandal 1620 S.W. 99 Court, Miami, FL 33165 Ruggieri Dario Bellido 1620 S.W. 99 Court, Miami, FL 33165 Orlando Acevedo 17305 S.W. 7 Street, Pembroke Pines, FL 33029 Josefa Acevedo 17305 S.W. 7 Street, Pembroke Pines, FL 33029

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this _______, 19_99__.

0 1

Signature

Signature

Articles of Incorporation Filing Fee - \$35

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of sections 607.0501 or 617.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

		•	tion is:A+.				
11	ie name an	d address o	of the registe	red agen	it and offic	e is:	
	Ruggieri	Bellido			-		
			(NAM	E)			
	1620 S.W	. 99 Cour	t			-	-
			BOX NOT A				
	Miami, F	L 33165			•		
			(CITY/STA	TE/ZIP)			

MAYING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PLOCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS SEGISTERED AGENT.

SECRETATIVE SIGNATURE SIGN

REGISTERED AGENT FILING FEE: \$35.00