

F06000005394

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

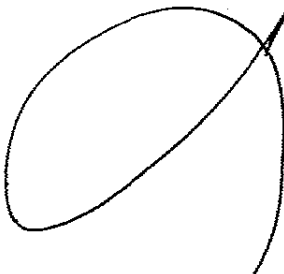
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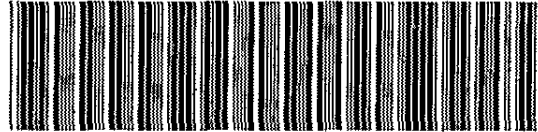
Certified Copies _____ Certificates of Status _____

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CLERK OF DISTRICT COURT
FLORIDA

06 AUG 17 PM 12:06

FILED



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED

06 AUG 17 AM 11:34

August 8, 2006

MICHAEL FLOWERS
SCHOLARS LEARNING GROUP
P.O. BOX 1012
LITTLE ROCK, AR 72203

SUBJECT: SCHOLARS GROUP, INC.
Ref. Number: W06000034997

We have received your document for SCHOLARS GROUP, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Unfortunately, the enclosed certified copy does not meet our filing requirements. We require a certificate of existence or certificate of good standing, which usually consists of a single sheet of paper, that clearly reflects the entity is a valid entity in its home state/country. You can obtain the certificate of existence or certificate of good standing from the same office that provided you with the certified copy.

Please return 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) 245-6934.

Loria Poole
Document Specialist

Letter Number: 906A00049387

800087516

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Scholars Group, Inc dba Scholars Learning Center
(Name of corporation - must include suffix)

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Michael Flowers
(Name of Person)
Scholars Learning Group
(Firm/Company)
P.O. Box 1012
(Address)
Little Rock, AR 72203
(City/State and Zip code)

For further information concerning this matter, please call:

Michael Flowers at 501, 952-0125
(Name of Person) (Area Code & Daytime Telephone Number)

STREET/COURIER ADDRESS:

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

- ☒ \$70.00 Filing Fee ☐ \$78.75 Filing Fee & Certificate of Status ☐ \$78.75 Filing Fee & Certified Copy ☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy

**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT
BUSINESS IN FLORIDA**

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1. Scholars Group, Inc.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

Scholars Learning Center
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Arkansas 3. 41-2209348
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. June 22, 2006 5. perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. _____
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 300 S. University Ave Ste J01, Little Rock, AR 72205
(Principal office address)

P.O. BOX 1012 Little Rock, AR 72203
(Current mailing address)

8. Educational Services
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Michael Flowers

Office Address: 3832 Baymeadows Rd Ste 363
Jacksonville, Florida 32217
(City) (Zip code)

10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Michael Flowers

(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

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06 AUG 17 PM 12:06
CLERK OF STATE
TALLAHASSEE, FLORIDA

12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: Michael Flowers

Address: PO Box 1012, Little Rock, AR 72203

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: Michael Flowers

Address: PO Box 1012, Little Rock, AR 72203

Vice President: _____

Address: _____

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. Michael Flowers

(Signature of Director or Officer listed in number 12 of the application)

14. President

(Typed or printed name and capacity of person signing application)



**Arkansas Secretary of State
Charlie Daniels**

State Capitol Building ♦ Little Rock, Arkansas 72201-1094 ♦ 501-682-3409

Certificate of Good Standing

I, Charlie Daniels, Secretary of State of the State of Arkansas, and as such, keeper of the records of domestic and foreign corporations, do hereby certify that the records of this office show

SCHOLARS GROUP, INC.

authorized to transact business in the State of Arkansas as a For Profit Corporation, filed Articles of Incorporation in this office June 22, 2006.

Our records reflect that said entity, having complied with all statutory requirements in the State of Arkansas, is qualified to transact business in this State.



**In Testimony Whereof, I have hereunto set my hand
and affixed my official Seal. Done at my office in the
City of Little Rock, this 14th day of August 2006.**



Charlie Daniels
Secretary of State

Online Certificate Authorization Code: e7c0458bc7d68a3

To verify the Authorization Code, visit sos.arkansas.gov