

TRANSMITTAL LETTER

No 1000007611

Department of State  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

500004651105--6  
-10/24/01--01024--013  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

SUBJECT: SMOKY BEAR PRESCHOOL and KINDERGARTEN, INC.  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is an original and one (1) copy of the articles of incorporation and a check for:

\$70.00  
Filing Fee

\$78.75  
Filing Fee &  
Certificate of  
Status

\$78.75  
Filing Fee  
& Certified Copy

\$87.50  
Filing Fee,  
Certified Copy  
& Certificate

ADDITIONAL COPY REQUIRED

FROM: BARBARA HURT  
Name (Printed or typed)

2500 N.E. 15th St.  
Address

Gainesville, Florida 32609  
City, State & Zip

(352) 373-9714  
Daytime Telephone number

FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
01 OCT 24 AM 7:02

NOTE: Please provide the original and one copy of the articles.

OCT 26 2001

**ARTICLES OF INCORPORATION**

In Compliance with Chapter 617, F.S., (Not for Profit)

ARTICLE I NAME

The name of the corporation shall be:

SMOKY BEAR PRESCHOOL and KINDERGARTEN, INC.

ARTICLE II PRINCIPAL OFFICE

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

2500 N.E. 15th St., Gainesville, FL 32609

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

The school seeks to insure character development and provide an educational foundation for children two-five years of age that will prepare them for primary school.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:

Directors are elected by a majority vote of the membership.

ARTICLE V INITIAL DIRECTORS/OFFICERS

The name and addresses:

- 1. Mr. George Scripture  
5445 CR 352 Keystone Heights, Florida 32656
- 2. Mrs. Ruth Mansell  
1702 N.W. 17th Lane Gainesville, Florida 32605
- 3. Mr. Dock Luckie  
4001 N.W. 23 Terrace Gainesville, Florida 32605

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the registered agent is:

Barbara Hurt, Director  
2500 N.E. 15th St. Gainesville, Florida 32609

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Gladys Clark  
4680 Clear Lake Dr. Gainesville, Florida 32607

\*\*\*\*\*  
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity.

Barbara Hurt  
Signature/Registered Agent Barbara Hurt

10-21-01  
Date

Gladys Clark  
Signature/Incorporator Gladys Clark

10-21-01  
Date

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