

PO 3000053561

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

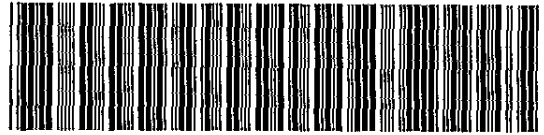
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
03 MAY -7 AM 10:32

BP 51

**TRANSMITTAL LETTER**

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

SUBJECT: Tiny Hearts Child Care, Inc.  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are 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 of Status  
**ADDITIONAL COPY REQUIRED**

FROM: Mildred R. Valenti  
Name (Printed or typed)

4536 Eden Woods Circle  
Address

Orlando, FL 32810  
City, State & Zip

(407) 293-3928  
Daytime Telephone number

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

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

03 MAY -7 AM 10:32

4/29/03

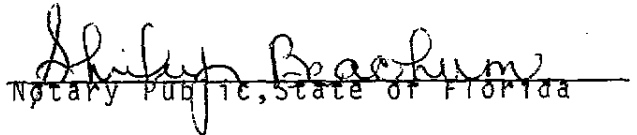
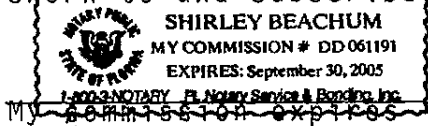
To Whom It May Concern,

I have no intention to reinstate the administratively dissolved corporation, Tiny Hearts Child Care, Inc. in reference to P01000041263. The attached is a different entity than the original filing. I release the name to be reused by another entity.



Mildred R. Valenti

Sworn to and subscribed before me this 30 day of April, 200



Notary Public, State of Florida

**ARTICLES OF INCORPORATION**

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

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TALLAHASSEE, FLORIDA

03 MAY -7 AM 10: 32

**ARTICLE I NAME**

The name of the corporation shall be:

Tiny Hearts Child Care, Inc.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/ mailing address is:

4536 Eden Woods Circle  
Orlando, FL 32810

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Daycare Center

**ARTICLE IV SHARES**

The number of shares of stock is: 100

**ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)**

The name(s), address(es) and title(s):

Mildred R. Valenti, /owner  
4536 Eden Woods Circle  
Orlando, FL 32810

**ARTICLE VI REGISTERED AGENT**

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

Mildred R. Valenti  
4536 Eden Woods Circle  
Orlando, FL 32810

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Mildred R. Valenti  
4536 Eden Woods Circle  
Orlando, FL 32810

\*\*\*\*\*  
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

Mildred R. Valenti  
Signature/Registered Agent

4/29/03  
Date

Mildred R. Valenti  
Signature/Incorporator

4/29/03  
Date