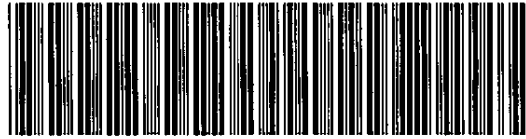


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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

(Business Entity Name)

(Document Number)

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

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TALLAHASSEE, FLORIDA



**COVER LETTER**

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

**SUBJECT:** Stacey's & Linsey's Tiny Tykes Pre-School 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

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
<b>ADDITIONAL COPY REQUIRED</b>	

**FROM:** (Stacey Smith) Stacey's & Linsey's Tiny Tykes Pre-School Inc.  
Name (Printed or typed)

105 W 11th Street  
Address

Lynn Haven, Fl. 32444  
City, State & Zip

850-527-6262  
Daytime Telephone number

staceysfuninthesun@att.net  
E-mail address: (to be used for future annual report notification)

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

**ARTICLES OF INCORPORATION**

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

**ARTICLE I NAME**

The name of the corporation shall be: Stacey's & Linsey's Tiny Tykes Pre-School Inc.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address  
500 W 11th Street  
Lynn Haven, Fl. 32444

Mailing address, if different is:  
8713 Front Beach Rd  
Panama City Beach, Fl 32407

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: Pre-School - Child Care  
Taking care of children from birth to five years old

**ARTICLE IV SHARES**

The number of shares of stock is: 100

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Stacey Smith, President  
Address: 8713 Front Beach Rd  
Panama City Beach, Fl 32407

Name and Title: Craig E. Smith, Secretary  
Address: 8713 Front Beach Rd  
Panama City Beach, Fl 32407

Name and Title: Linsey Smith, Vice President  
Address: 8713 Front Beach Rd  
Panama City Beach, Fl 32407

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_

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**SECRETARY OF STATE**  
**TALLAHASSEE, FLORIDA**

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_  
 Address \_\_\_\_\_ Address: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

The **name and Florida street address** (P.O. Box NOT acceptable) of the registered agent is:

Name: Stacey Smith  
 Address: 8713 Front Beach Rd  
Panama City Beach, Fl 32407

**ARTICLE VII INCORPORATOR**

The **name and address** of the Incorporator is:

Name: Stacey Smith  
 Address: 8713 Front Beach Rd  
Panama City Beach, Fl 32407

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**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: 06/12/2017. (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

*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*

\_\_\_\_\_  
 Required Signature/Registered Agent 6-12-17  
Date

*I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.*

\_\_\_\_\_  
 Required Signature/Incorporator 6-12-17  
Date