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(Re	equestor's Name)			
(Address)				
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(City/State/Zip/Phone #)				
PICK-UP	☐ WAIT	MAIL .		
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
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COVER LETTER

10: New Filing Se Division of Co			
SUBJECT: C	are For Kids	on – must include suffix	
	Name of Corporati	on – must include suffix	···
Dear Sir or Madam:			
"Certificate of Existence	ion by Foreign Not for Profi e", or "Cerificate of Good S n to conduct its affairs in Fl	tanding" and check are submit	on to Conduct its Affairs in Floridated to register the above referenced
Please return all corresp	ondence concerning this ma	atter to the following:	
	Larry G	Name of Person	
		Name of Person	
		Firm/Company	
	4976 E. CF	Address	
		1 3 4 7 8 5 ity/State and Zip Code	
<u>la</u> E-m	rrye a reen le ail address (to be used for	Vahoo. Com future annual report notification	on)
For further information	concerning this matter, plea	ase call:	
Larry G	of Person at	(352) 250 - 8 Area Code & Daytime Tele	
MAILING AD New Filing Sec Division of Co P.O. Box 6327 Tallahassee, FL	tion rporations	STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	
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



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

RESOLUTION OF THE BOARD OF DIRECTORS TO ADOPT AN ALTERNATE NAME FOR USE IN FLORIDA

(Pursuant to section 607.1506 or 617.1506, F.S.)

(Please print or type)

I, the undersigned Larry Green (Name)	_, do hereby certify
that this Resolution of the Board of Directors of Care For Kids	Inc.
	OP
(Name of Corporation)	
a corporation duly organized and existing under the laws of	
was adopted on March 13, 2007	, adopting the alternate
name of Care 4 Kids INC. (Alternate Name) NOTE: Must contain a corporate suffor use in Florida as its real name is unavailable in Florida.	SECRETAR DIVISION OF C
Signature of Chairman, Vice Chairman of the Board, a Title of	AM 10: 34 Person signing

FILING FEE \$35

(No fee required if submitted with a foreign not for profit qualification or amendment)

Make checks payable to Florida Department of State and mail to:

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

APPLIGATION BY FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN FLORIDA

IN COMPLIANCE WITH SECTION 617.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN THE STATE OF FLORIDA: Care For Kids Inc.

(Name of corporation: must include the word "INCORPORATED" or "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present. "Company" or "Co." may not be used as a corporate suffix by a nonprofit corporation.) (State or country under the law of which it is incorporated)

(FEI number, if applicable) March 13 2007

(Date of Incorporation)

5. <u>Perpetual</u>
(Duration: Year corp. will cease to exist or "perpetual") NA Waiting for registration (Date first conducted at larrs in Florida in prior to registration. See sections 617.1501 & 617.1502, F.S. to determine penalty liability.) 530 W. River Road, Jacksonville, GA 31544
(Principal office address) 4916 E. CR46Z, Wildwood, FI 34785 Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida) 9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Larry Green Office Address: 4976 E. CR462 Wildwood, Florida

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.

(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.

12. Names and addresses of officers and/or directors: A, DIRECTORS Chairman: Address: Vice Chairman: Address: Director: Lemuel Miller 530 W. River Road Jacksonville GA 31544 Director: **B. OFFICERS** President: Larry Green Address: 4976 E. CR462 Wildwood FI 34785 Vice President: Larry Green II Wildwood, F1 34785 Cypræss Grove Dr. Eustis, Fl 32736 Treasurer: Cynthia Kountanis Cypress Grove Dr. NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application) Green Tresident
(Typed'or printed name and capacity of person signing application)

Control No. 07022301

STATE OF GEORGIA

Secretary of State

Corporations Division 315 West Tower #2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530

CERTIFICATE OF EXISTENCE

I, Brian P. Kemp, Secretary of State and the Corporations Commissioner of the state of Georgia, hereby certify under the seal of my office that

CARE FOR KIDS, INC.

Domestic Non-Profit Corporation

was formed or was authorized to transact business on 03/13/2007 in Georgia. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.



WITNESS my hand and official seal of the City of Atlanta and the State of Georgia on 1st day of June, 2011

B:Ph

Brian P. Kemp Secretary of State

Certification Number: 7523571-1 Reference:

Verify this certificate online at http://corp.sos.state.ga.us/corp/soskb/verify.asp

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SECRETARY OF STATE DIVISION OF CORPORATIONS