



The Tax Relief Co.

4055 Faber Place Drive Suite 214
North Charleston, SC 29405
Phone: (843) 566-9211 Fax: (843) 566-9576

L00000000272

December 24, 1999

Secretary of State
Division of Incorporation
P.O. Box 6327
Tallahassee, FL 32314

RE: LLC Formation

400003086644--2
-01/04/00--01005--011
****155.00 ****155.00

Dear Sir,

Enclosed for filing please find an original and one (1) copy of the Articles of Organization in reference to the above captioned matter. Please file and return the stamped copy back to me in the envelope provided. Also enclosed is a check in the amount of \$155 to cover the filing fees of the Articles.

If you have any questions or comments concerning this or any other matter, please do not hesitate to contact me at 1-843-566-9216.

Sincerely,

Patricia Welling

Patricia Welling, CSR

FILED
00 JAN -4 PM 12:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

L00-272

Noting Availability	1-1
Document Examined	OK
Updated	OK
Updated Verifier	OK
Approved	OK
M. P. Verifier	OK

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I – Name

The name of the Limited Liability Company is:

NEW BEGINNING KIDS STOP CHILD DEVELOPMENT CENTER, LLC

ARTICLE II – Address

The mailing address and street address of the principal office of the Limited Liability Company is:

1252 KEYSTONE COURT, AUBURNDALE, FL 33823

ARTICLE III – Registered Agent, Registered Office, and Registered Agent's Signature:

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

Terrie L. Howell

Name

212 E. Park St.

Florida street address (P.O. Box **NOT** acceptable)

Auburndale, FL 33823

City, State, Zip

FILED
00 JAN -4 PM 12:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S.

Terrie L. Howell

Registered Agent's Signature

ARTICLE IV – Management (Check box if applicable.)

[] The Limited Liability Company is to be managed by one manager or more manager and is, therefore, a manager – managed company.

ARTICLE V – Effective Date

The effective date for the establishment of this limited liability company is:

January 1, 2000

Terrie L. Howell 12/27/99

Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Terrie L. Howell

Typed or printed name of signee

FILING FEES:

- \$ 100.00 Filing Fee for Articles of Organization
- \$ 25.00 Designation of Registered Agent
- \$ 30.00 Certified Copy (OPTIONAL)
- \$ 5.00 Certificate of Status (OPTIONAL)

FILED
00 JAN -4 PM 12:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA