

**Electronic Articles of Organization
For
Florida Limited Liability Company**

L07000012853
FILED 8:00 AM
February 05, 2007
Sec. Of State
alunt

Article I

The name of the Limited Liability Company is:
CARING HANDS LEARNING CENTER, LLC

Article II

The street address of the principal office of the Limited Liability Company is:
2117 W. 44TH STREET
JACKSONVILLE, FL. 32209

The mailing address of the Limited Liability Company is:
3718 LYDIA ESTATES DR. E
JACKSONVILLE, FL. 32218

Article III

The purpose for which this Limited Liability Company is organized is:
ANY AND ALL LAWFUL BUSINESS, INCLUDING, BUT NOT LIMITED TO
THE PROVISION OF DAYCARE AND NURSERY SERVICES TO MINOR
CHILDREN

Article IV

The name and Florida street address of the registered agent is:
BETSY S. HOLTON, P.A.
1794 ROGERO ROAD
JACKSONVILLE, FL. 32211

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.

Registered Agent Signature: BETSY S. HOLTON, P.A.

Article V

The name and address of managing members/managers are:

Title: MGRM
LENAN CAPPEL
3718 LYDIA ESTATES DR., E
JACKSONVILLE, FL. 32218

Title: MGRM
PAULINE CAPPEL
3718 LYDIA ESTATES DR., E.
JACKSONVILLE, FL. 32218

Signature of member or an authorized representative of a member

Signature: BETSY S. HOLTON

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