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COVER LETTER

TO:						
SUBJ	ECT: BOJ Prescho	ool, LLC				_
			ed Liability Comp	any)		
The er	nclosed Articles of Orga	anization and fee(s) are	submitted for filin	g.		
Please	return all corresponder	nce concerning this mat	ter to the following	ड़:		
	Jonas Brown				_	_1
			(Name of Person)		SECRET	
			(Firm/Company)		SSE SSE	O PH
SUBJECT: BOJ Preschool, LLC (Name of Limited Liability Company) The enclosed Articles of Organization and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Jonas Brown (Name of Person) (Firm/Company) PO BOX 460485 (Address) Aurora, CO 80046 (City/State and Zip Code) For further information concerning this matter, please call: Jonas Brown (Name of Person) Aurora, CO 80046 (City/State and Zip Code) For further information concerning this matter, please call: Certificate of Status Area Code & Daytime Telephone Number) Enclosed is a check for the following amount: S125.00 Filing Fee Certificate of Status Aurora Code Status Certificate Organization Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Ziffo Executive Conter Circle		PH IS				
			(Address)		ORIE ORIE	
	Aurora, CO 8004	6			>	<u></u>
		(Cit	y/State and Zip Cod	e)		
For fu	rther information conce	rning this matter, pleas	e call:			
Jona	s Brown		at (303	717 6125		_
	(Name of Pe	rson)	(Area Coo	le & Daytime Tele	phone Number)	
Enclo	sed is a check for the	following amount:				
☑ \$125			Certified Co	ру	Certificate of Sta Certified Copy	atus &
	Re Di P.0	gistration Section vision of Corporations D. Box 6327	Registrat Division Clifton F 2661 Ex	tion Section of Corporations Building		

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Co	ompany is:	
BOJ Preschool, LLC (Must end with the words "	'Limited Liability Company, "L.L.C.," or "LLC.")	<u></u>
ARTICLE II - Address: The mailing address and street addre	ess of the principal office of the Limited	Liability Company is:
Principal Office Address:	Mailing Address:	
Joy Frink-Bornelus 18735 E Colonial Dr Orlando, FL 32820 ARTICLE III - Registered Agent, (The Limited Liability Company cannot serve as business entity with an active Florida registration.) The name and the Florida street address Joy Frink-Borne	ress of the registered agent are:	2004 AFR 10 PM 12: 11 SENATE AND AND STATE TALSTANDASSEE, FLORIDA
18735 E Coloni	al Dr rida street address (P.O. Box NOT acceptable)	,
Orlando	FL 32820 City, State, and Zip	

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.

Registered Agent's Signature (REQUIRED)

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title: "MGR" = Manager	Name and Address:	
"MGRM" = Managing Memb	Joy Frink-Bornelus 18735 E Colonial Dr Orlando, FL 32820	
	SECRETARY OF STATE AHASSEE, FLORIDA	זרחכ
effective date is listed, the date	than the date of filing: (OPTION must be specific and cannot be more than five business d	
00 days after the date of filing.) <u>REQUIRED</u> SIGNATURE:		
Simulation	La Frank-Ranfur	
Signature of	a member or an authorized representative of a member.	

Joy Frank-Bornelus

that the facts stated herein are true.)

Typed or printed name of signee

of this document constitutes an affirmation under the penalties of perjury

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)