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Office Use Only



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D. BRUCE

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EXAMINER

COVER LETTER

	C
TO:	Registration Section Division of Corporations
SUBJ	ECT: Smart Start Child
	Name o
The er	nclosed Articles of Organization and fee
Please	return all correspondence concerning th
	Stephanie Evans
	Smart Start Child Ca
	2319 NW 37 Terrace

d Care and Learning Center of Limited Liability Company

e(s) are submitted for filing.

his matter to the following:

Stephanie Evans	
Name of Person	
Smart Start Child Care and Learning Center	
Firm/Company	
2319 NW 37 Terrace	
Address	
Lauderdale Lakes, Fl 33311	SE
City/State and Zip Code	TARE P
sjevans16@gmail.com	<u> </u>
E-mail address: (to be used for future annual report notification)	- SES
For further information concerning this matter, please call:	지유 :
Stephanie Evans <u>at (954</u>) 303-8789	_ 85 '
Name of Person Area Code & Daytime Telephone Number	J.•
Enclosed is a check for the following amount:	
\$125.00 Filing Fee \$\sum \text{S130.00 Filing Fee & Certificate of Status} \text{Certified Copy (additional copy is enclosed)} Certified Copy (additional copy is enclos	atus &
Mailing Address Street/Courier Address Parietrative Section Residential Section	

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

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Smart Start Child Care and Learning Center, LLC

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

A	RI	r I	C	LE.	П	_	Δ	dd	ress	

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

_	· ·	
Principal Office Address:	Mailing Address:	
2319 NW 37 Terrace Lauderdale Lakes, Fl 33311	2319 NW 37 Terrace Lauderdale Lakes, Fl 33311	
Lauderdale Lakes, FI 33311	Ladderdaic Lancs, 1700011	
ARTICLE III - Registered Agent, Regist (The Limited Liability Company cannot serve as its own business entity with an active Florida registration.) The name and the Florida street address of	Registered Agent. You must designate an individua	al or another
Stephanie Evans	-	APP FI SEP 24 AHASS
4	lame	SEX F FAR
2319 NW 37	Terrace	
Florida stre	et address (P.O. Box NOT acceptable)	SS 7 (2)
Lauderdale Lakes	s _{FL} 33311	23 23
Ci	ty, 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)

(CONTINUED)

Page 1 of 2

ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows:

	_	Stephanie Evans 2319 NW 37 Terrace Lauderdale Lakes, Fl 33311
MGRM	 -	Wanda St. James
		2319 NW 37 Terrace Lauderdale Lakes, Fl 33311
	_	
-	_	
(Use attachment if	necessary)	
LE V: Effective d	ate, if other than the	date of filing: (OPTIONAl especific and cannot be more than five business days

(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. I am aware that any 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.)

Stephanie Evans

Typed or printed name of signee

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)

12 SEP 24 AH II: 23
SECRETARY OF STATE
ALL AHASSEE FLORIG.

APPROVED