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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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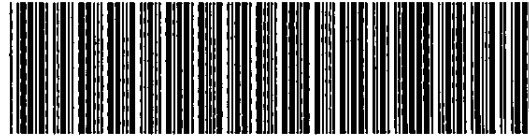
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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MAR 5 2013

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

SUBJECT: **Daycare 4 Sale, 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:

John Preston
5901 SW 74th Street, Suite 307,
South Miami, Florida 33143

For further information concerning this matter, please call:

John Preston at (305) 665-7210

Enclosed is a check for the following amount:

125.00 Filing Fee.

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TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name

The name of the Limited Liability Company is: **Daycare 4 Sale, LLC.**

ARTICLE II - Address

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

Principal Office Address:

**5901 SW 74th Street, Suite 307,
South Miami, Florida 33143**

Mailing Address:

**5901 SW 74th Street, Suite 307,
South Miami, Florida 33143**

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TALLAHASSEE, FLORIDA

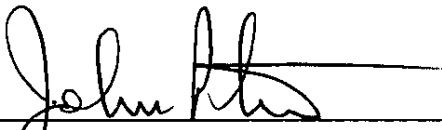
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ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature

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

**John Preston
5901 SW 74th Street, Suite 307,
South Miami, Florida 33143**

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

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

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

Title:

Name and Address:

Manager

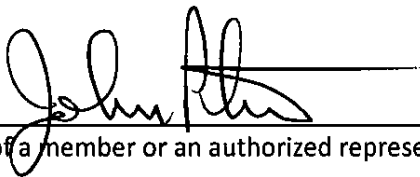
**John Preston
5901 SW 74th Street, Suite 307,
South Miami, Florida 33143**

Manager

**John Preston
5901 SW 74th Street, Suite 307,
South Miami, Florida 33143**

ARTICLE V: Effective date

The effective date is the date of filing.



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. 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.)

John Preston

Typed or printed name of signee

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