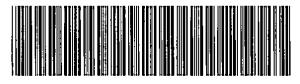
## L2100004 4911

(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			
Office Use Only			



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21 JAN 15 PH 12: 01

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## **COVER LETTER**

**New Filing Section** 

TO:

Division of Corporations						
SUBJECT	Kids Plus Presch	ool				
3000000	Name of Limited Lia	bility Company				
The enclos	sed Articles of Organization and fee(s) are submitt	ted for filing.				
Please retu	urn all correspondence concerning this matter to th	ne following:				
	Steve Curr	ie				
	Name of Person					
	Kids Plus Preschool					
	Firm/Company					
	1003 South Kirkman Rd Ste 100					
	Ac	ldress				
Orlando, Florida 32811						
	City/State and Zip Code					
•	E-mail address: (to be used for futur	re annual report notification)				
For further i	information concerning this matter, please call:					
	Steve Currie 321 961 3897					
	Name of Person Area Code	Daytime Telephone Number				
Enclosed is	s a check for the following amount:					
<b>■\$125.0</b> 0	Certificate of Status Cert	155.00 Filing Fee & Certificate of Status & Certified Copy (additional copy is enclosed)				
	Mailing Address  New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address New Filing Section Division The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303				

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	Kids Plus	Preschool LLc.		
(Must con	tain the words "Limited L	iability Company, "	'L.L.C.," or "LLC.")	
ARTICLE II - Address:				
he mailing address and street a	iddress of the principal of	fice of the Limited I	Liability Company is:	
Princip	Principal Office Address: 1003 South Kirkman Rd Ste 100		Mailing Address: 1003 South Kirkman Rd Ste 100	
1003 South I				
	Orlando, Florida 32811		Orlando, Florida 32811	
Orlando,  RTICLE III - Registered Ag the Limited Liability Companiother business entity with an	ent, Registered Office, & y cannot serve as its own b active Florida registration	Registered Agent. Y n.)	t's Signature:	
Orlando,  ARTICLE III - Registered Ag The Limited Liability Companionother business entity with an	ent, Registered Office, & y cannot serve as its own I active Florida registration address of the registered	Registered Agent. Y n.)	t's Signature:	
Orlando.  ARTICLE III - Registered Ag	ent, Registered Office, & y cannot serve as its own b active Florida registration	Registered Agent. Y n.)	t's Signature:	
Orlando,  ARTICLE III - Registered Ag The Limited Liability Companiother business entity with an	ent, Registered Office, & y cannot serve as its own I active Florida registration address of the registered	Registered Agent. Y  1.)  agent are:  Name		
Orlando,  ARTICLE III - Registered Ag The Limited Liability Companiother business entity with an	gent, Registered Office, & y cannot serve as its own bactive Florida registration address of the registered.  Steve Currie	Registered Agent, Y  1.)  agent are:  Name  Rd Ste 201	t's Signature: 'ou must designate an individual	
Orlando,  ARTICLE III - Registered Ag The Limited Liability Companiother business entity with an	ent, Registered Office, & y cannot serve as its own bactive Florida registration address of the registered Steve Curric	Registered Agent, Y  1.)  agent are:  Name  Rd Ste 201	t's Signature: 'ou must designate an individual	

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 605, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

1 JAN 15 PH 12: 01

## ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

Title: "AMBR" = Authorized Member	Name and Address:	
"MGR" = Manager		
<u>MGR</u>	Steve Currie III	
		· · · · · ·
<del></del>		
	<del>- · ·</del>	
	<del></del>	
(Use attachment if necessary)		
•		
ARTICLE V: Effective date, if other than the	date of filing:	(OPTIONAL)
it an effective date is listed, the date must in he date of filing.)	be specific and cannot be more than five bu	siness days prior to or 90 days after
	not meet the applicable statutory filing requi	irements, this date will not be listed as
the document's effective date on the Departs	ment of State's records.	
ARTICLE VI: Other provisions, if any.		
CRITCLE VI: Onlei provisions, ii any.		<u> </u>
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		<u> </u>
	0 1 0	₩
REOUIRED SIGNATURE:	X // //	<u> </u>
	) 78- (////R	<b>A</b>
Signature of	a member or an authorized representative	e of a member.
This document is e	xecuted in accordance with section 605,0203	3 (1) (b), Florida Statutes.
I am aware that any	y false information submitted in a document to legree felony as provided for in s.817.155, F.	o the Department of State
construces a and c	regree tening as provided for its soft 1.155, F.	J.
	Steve Currie	
	Typed or printed name of signce	

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)