

# N02000007876

## TRANSMITTAL LETTER

Department of State  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

SUBJECT: All Faith Daycare Center, Inc.  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

300008357173--4  
-10/14/02--01037--003  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

☐ \$70.00  
Filing Fee

☒ \$78.75  
Filing Fee &  
Certificate of  
Status

☐ \$78.75  
Filing Fee  
& Certified Copy

☐ \$87.50  
Filing Fee,  
Certified Copy  
& Certificate

**ADDITIONAL COPY REQUIRED**

FROM: Felecia Saddler Armstrong  
Name (Printed or typed)  
12220 Springmoor Three Court  
Address  
Jacksonville, Fl. 32225  
City, State & Zip  
(904) 398-2040 or (904) 620-0506  
Daytime Telephone number

FILED  
02 OCT 14 AM 8:19  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**NOTE: Please provide the original and one copy of the articles.**

me 10/15

# ARTICLES OF INCORPORATION

In Compliance with Chapter 617, F.S., (Not for Profit)

## ARTICLE I NAME

The name of the corporation shall be:

ALL FAITH DAYCARE CENTER, INC.

## ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

All Faith Daycare Center  
3133 Spring Glen Road Jacksonville, Fl. 32207  
Jacksonville, Fl.

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To provide a place for children which is safe, clean, and presents and presents a positive atmosphere for growth and development for children to be cared for in the absences of their parents and guardian.

## ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:

1. Board vacancies will be advertised and posted in Human Resources offices of Children and Families District office - NAYEC monthly news.
2. The existing Board Members will vote from the selective resumes.
3. The Selected candidates will be notified by a written letter from President of the Board.

## ARTICLE V INITIAL DIRECTORS/OFFICERS

The name(s), address(es) and title(s):

<u>President</u>	<u>Vice-President</u>	<u>Treasurer</u>
Alberta Campbell	Carolyn Palmer	Tracye Tyson
P.O. Box 9457	3239 Montcalm Drive	6059 Bart Road
Jax, Fl. 32208	Jax, Fl. 32208	Jax, Fl. 32209

## ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Felecia Saddler Armstrong  
12220 Springmoor Three Court  
Jacksonville, Fl. 32225

## ARTICLE VII INCORPORATOR

The name and address of the incorporator is:

Felecia Saddler Armstrong  
12220 Springmoor Three Court  
Jacksonville, Fl. 32225

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Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity.

*Felecia Saddler Armstrong*  
Signature/Registered Agent

*10/10/02*  
Date

*Felecia Saddler Armstrong*  
Signature/Incorporator

*10/10/02*  
Date