

N15000005017

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

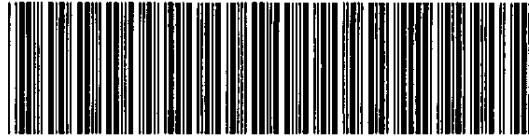
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400272906224

05/18/15--01032--015 **78.75

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

15 MAY 18 AM 11:21

APPROVED
AND
FILED

HA

COVER LETTER

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

SUBJECT: Unique Kids 2 Preschool, Inc.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

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: Shannette Rivera
Name (Printed or typed)

1590 NE 142nd ST

Address

North Miami, FL 33161

City, State & Zip

305-493-9625

Daytime Telephone number

uniquekidsmgmt@aol.com

E-mail address: (to be used for future annual report notification)

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



April 13, 2015

To Whom It May Concern:

I am the owner of Unique Kids 2 Preschool, Inc. document number P14000083700 which was recently dissolved. I had to dissolve the corporation because I am trying to start a not for profit business and I set the business up to be for profit. I have attached the application to reapply for a not for profit corporation using the same business name. I do not want to change it. If you have any additional questions you can reach me at the number below.

Sincerely,

A handwritten signature in black ink, appearing to read 'Shannette Rivera', is written over a horizontal line.

Shannette Rivera
Vice President

ARTICLES OF INCORPORATION
In compliance with Chapter 617, F.S., (Not for Profit)

APPROVED
AND
FILED

15 MAY 16 AM 11:21

SECRETARY OF STATE
TALLAHASSEE FLORIDA

ARTICLE I NAME

The name of the corporation shall be: Unique Kids 2 Preschool, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address:
1590 NE 142nd ST

North Miami, FL 33161

Mailing address, if different is:
836 NW 183rd

Miami, FL 33169

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: The purpose of this Corporation shall be to conduct and carry on the work of an organization not for profit but exclusively for charitable, scientific, literary, or educational purposes in such manner that no part of its income or property shall inure to the private benefit of any donor, member, trustee, officer or individual having personal or private interest in the activities of the corporation, and in such manner that it shall not in any way, directly or indirectly, engage in carrying on propaganda or otherwise attempt to influence legislation; to make donations, gifts, contributions and loans out of its annual net income or assets, or both, (without limit as to the amount going to any one recipient or in the aggregate, to all recipients).

ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected and appointed: written ballot

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Sharon Althea Laing/ P

Address: 1590 NE 142nd ST
North Miami, FL 33161

Name and Title: Shannette Rivera/ VP

Address: 1590 NE 142nd ST
North Miami, FL 33161

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

APPROVED
AND
FILED

15 MAY 18 AM 11:21

SECRETARY OF STATE
TALLAHASSEE FLORIDA

ARTICLE VI REGISTERED AGENT

The **name and Florida street address** (P.O. Box NOT acceptable) of the registered agent is:

Name: Sharon Althea Laing

Address: 1590 NE 142nd ST
North Miami, FL 33161

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: Shannette Rivera

Address: 1590 NE 142nd ST
North Miami, FL 33161

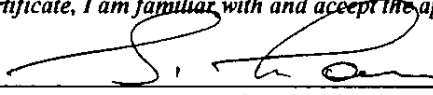
ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

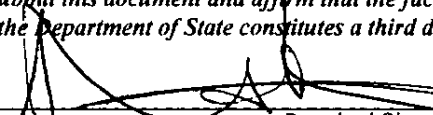
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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


Required Signature of Registered Agent

5/10/15
Date

I submit this document and affirm 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.


Required Signature of Incorporator

5/10/15
Date