DOODSS 367

FILED

OD MAY 30 PH 2:31

SECRETARY OF STATE

ALLAMASSEE, FLORIF.

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

SUBJECT: Destiny Academy Child Care To Curporate (Proposed corporate name - must include suffix)

100003270861--1 -05/30/00--01127--005 *****87.50 ******87.50

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

□ \$70.00 □

\$78.75

Filing Fee Filing Fee & Certificate of Status

□\$78.75

\$87.50

Filing Fee

Filing Fee,

& Certified Copy

Certified Copy

& Certificate of

Status

ADDITIONAL COPY REQUIRED

FROM: Colrecta C. Collhony
Name (Printed or typed)

2122 ocuron ave,

Address

Orl. Clorida. 32811 City, State & Zip

un 425-1172 pr 407 427-775

Daytime Telephone number

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

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

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ARTICLE I	1	VAME
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The name of the corporation shall be:

Destiny academy child care Incorporated

ARTICLE II PRINCIPAL OFFICE

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

elaz aaron ave. orl. Ela. 32811.

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

100 Shares

at-

\$11.00 a share

Catrecia a anknowy 100 shares

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Catrecia a. anthony

2122 acron Que. Orl. [la. 32811

ARTICLE V INCORPORATOR

The <u>name and address</u> of the incorporator to these Articles of Incorporation are:

Carrecia a. anthony

11865. DJ. Ira. suo norosassels

(An additional article must be added if an effective date is requested.)

Having been named as registered agent and to accept service of process for the above stated corporation 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

xbligations of my position as registered agent

Signature/Registered Agent