## P00000072641

## TRANSMITTAL LETTER

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

	ANO DIOS GAGO IOM I)	TE NAME - MOST INCL	ODE SUFFIX)	•	-
Enclosed is an origin	al and one(1) copy of the article		000033383 -07/27/0001 *****87.50	357- 10711 *****	4 302 37.50
	and one(1) copy of the action	os or moorporation and a	CHECK TOT .		
□ \$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	☐ \$78.75 Filing Fee & Certified Copy	Filing Fee, Certified Copy & Certificate of Status		
		ADDITIONAL CO	PY REQUIRED		
FROM:	Rosina tasilla Name (P	rinted or typed)	7.5 	00 JUL 27 PM 12:	-T)
3300 S. Conway Rd  Address  OF lando FL 32812					FILED
	Orlanso, FL 32812 City, State & Zip				
	401 281-4622				
•	Daytime T	elephone number			

7. Burch JUL 3 1 2000

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

In compliance with Chapter 607 and/or Chapter 621, F.S. (P	TOIL	
ARTICLE I NAME		
The name of the corporation shall be:	1	
Precious Years CHIBCARE & treschool, I	nc.	
ARTICLE II PRINCIPAL OFFICE		5 =
The principal place of business/mailing address is:		=
3300 S. Conway Kd.		FILE
OR/AN10, FL 32812	<u> </u>	
ARTICLE III PURPOSE		75 75 75
The purpose for which the corporation is organized is:		ν ν
FORMAlizE business And organize legal	Corporation	
ARTICLE IV SHARES		
The number of shares of stock is:		
1 stock		
The name(s) and address(es):  Rosina Pabilla (Sirector)  1035 Bluejack OAK BR  OVIEGO, FL 32765	ptional)	
ARTICLE VI REGISTERED AGENT  The name and Florida street address of the registered agent is		
Rosina PASILLA 1035 BlueJACK DAIL SR		
OVIESO, FL 32765		
ARTICLE VII INCORPORATOR The name and address of the Incorporator is:		\$- \$***E
Rosina Tabilla 1035 Blue nek OAK DR		
OVIESO, FL 32765	<del></del>	
**********	******	ale ale ale
Having been named as registered agent to accept service of process for the certificate, I am familiar with and accept the appointment as registered agent.	e above stated corporation at the place designated nt and agree to act in this capacity	*** ! in this
201	/ /	
Signature/Registered Agent	7/05/00 Data	
~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	Date	

Signature/Incorporator