

TRANSMITTAL LETTER

**PO1000001996**

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

SUBJECT: Kidz Zone, Inc.  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

700003525787--5  
-01/05/01--01091--001  
\*\*\*\*\*87.50 \*\*\*\*\*87.50

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 of Status

**ADDITIONAL COPY REQUIRED**

FROM: Rebbecca J. Steele  
Name (Printed or typed)

8594 Wattulla Sp. Rd.  
Address

Tallahassee FL 32311  
City, State & Zip

421-6060  
Daytime Telephone number

01 JAN -5 PM 1:52  
01 JAN -5 PM 1:45  
RECEIVED  
DIVISION OF CORPORATION  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE

APPROVED  
AND  
FILED

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

# ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

## ARTICLE I NAME

The name of the corporation shall be: Kidz Zone, INC.

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is: 8552 Watulla Springs Rd  
Tallahassee, FI 32310

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Daycare

## ARTICLE IV SHARES

The number of shares of stock is: 10

## ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

Bobby L. Steele 8594 Watulla Spr. Rd.  
Tallahassee, FI 32310  
Rebetah J. Steele 8594 Watulla Springs Rd.  
Tallahassee, FI 32310

## ARTICLE VI REGISTERED AGENT

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

Bobby Steele  
8594 Watulla Spr. Rd Tallahassee, FI 32310

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Rebetah J. Steele  
8594 Watulla Spr. Rd. Tallahassee, FI 32310

\*\*\*\*\*  
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

Bobby L. Steele  
Signature/Registered Agent

1/5/01  
Date

Rebetah J. Steele  
Signature/Incorporator

1/5/01  
Date

01 JAN -5 PM 1:52  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

APPROVED  
AND  
FILED