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Florida Department of State

Division of Corporations

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Katherine Harris, Secretary of State

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To: Division of Corporations
Fax Number : (850) 205-0381

From: Account Name : ACE INDUSTRIES, INC.
Account Number : 070744001530
Phone : (305) 358-2571
Fax Number : (305) 358-7832

FLORIDA PROFIT CORPORATION OR P.A.

ADONAI CHILDREN'S DAY CARE CENTER, INC.

Certificate of Status	0
Certified Copy	1
Page Count	01
Estimated Charge	\$78.75

FILED
01 APR 23 AM 11:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

B. McKnight APR 23 2001

H01-43798

ARTICLES OF INCORPORATION

The undersigned subscriber to these Articles of Incorporation, a natural person competent to contract, hereby forms a corporation under the laws of the State of Florida, for the purposes hereinafter set forth.

ARTICLE I - NAME

The name of this corporation is: ADONAI CHILDREN'S DAY CARE CENTER, *INC.*

ARTICLE II NATURE OF BUSINESS

The general Character purpose, the nature of business to be transacted by this corporation is to carry on in any capacity any legal trade or business.

ARTICLE III - CAPITAL STOCK

The maximum number of shares of stock that this corporation is authorized to have outstanding at any one time is: 100 shares of common stock; par value \$1.00.

ARTICLE IV - INITIAL CAPITAL

The amount of the capital with which this corporation shall begin business is \$100.00.

ARTICLE V - TERM OF EXISTENCE

This corporation shall have perpetual existence.

ARTICLE VI - ADDRESS

The initial street address of the principal office of this corporation is to be at 1931 N.W. 194 Terrace, Carol City, Florida 33056 Board of Directors may from time to time designate such other address and place for the principal office of this corporation as it may see fit.

ARTICLE VII - REGISTERED AGENT

In pursuance of chapter 48.091, Florida Statutes, the following is submitted in compliance with said Act:

That, ADONAI CHILDREN'S DAY CARE CENTER, desiring to organize under the laws of the State of Florida with its principal office as indicated in the Articles of Incorporation at the of Miami, County of Miami-Dade, has named: Loretta Ford, as its agent to accept service of process within this state of Florida, 1931 N.W. 194 Terrace, Carol City, Florida 33056.

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ACKNOWLEDGMENT

Having been named to accept service of process for the above stated corporation, at the place designated in this certificate, I hereby accept to act in this capacity and agree to comply with the provisions of said Act relative to keeping open said office.

Loretta Ford
LORETTA FORD

ARTICLE VIII - DIRECTORS

The corporation shall have one (1) director initially. The number of directors may be increased or diminished from time to time by the by-Laws, but shall never be less than one.

ARTICLE IX - INITIAL DIRECTORS

The names and street addresses of the initial directors who shall hold office until their successors are elected and have qualified are as follows:

Name	Address
LORETTA FORD	1931 N.W. 194 Terrace Carol City, Florida 33056

ARTICLE -X- INCORPORATOR

The name and street address of the incorporator to these Articles of Incorporation is Loretta Ford, 1931 N.W. 194 Terrace, Carol City, Florida 33056.

ARTICLE XI - EFFECTIVE DATE

These Articles of Incorporation shall be effective upon acceptance by the Secretary of State.

ARTICLE XII - AMENDMENT

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These Articles of Incorporation may be amended in the manner provided by law. Every amendment shall be approved by the Board of Directors, proposed by them to the stockholders, and approved at a stockholders' meeting by a majority of the stockholders entitled to vote thereon, manifesting their intention that a certain amendment to these Articles of Incorporation be made.

IN WITNESS WHEREOF, I have hereunto set my hand and seal, acknowledged and filed the 23rd Of April, A.D. 2001.

Loretta Ford
Loretta Ford

STATE OF FLORIDA)

)

SS:

COUNTY OF DADE)

BEFORE ME, The undersigned Notary Public, Personally appeared Loretta Ford, to me well known to be the individual described in and first being duly sworn, executed the foregoing Articles of Incorporation and acknowledged before me that she executed the same for the purposes therein expressed.

Witness my hand and official seal in the County and State named Above
this _____ Day _____ Of _____, A.D. 2001.

NOTARY PUBLIC, STATE OF FLORIDA

My Commission Expires:

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TALLAHASSEE, FLORIDA

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