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TRANSMITTAL LETTER

01 JUN 13 PM 3:51 SECRETARY OF STATE TALLAHASSEE FLORIDA

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

700004418407--8 -06/13/01--01088--022 *****78.75 *****78.75

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SUBJECT:	Cheryl's St. Pete Beach Child Care, Inc. (Proposed corporate name - ninst include suffix)				
Enclosed is an origi	inal and one(1) copy of the articles	s of incorporation and a	check for :		
\$70.00 Filing Fee	×⊠≈\$78.75 Filing Fee & Certificate	□\$122.50 Filing Fee & Certified Copy	S131.25 Filing Fee, Certified Copy & Certificate		
	į	ADDITIONAL CO	PY REQUIRED	-	
FROM:	Cheryl Morgenstein Name (Pri	inted or type ')		il sint	
	505 79 Ave	ddress			
		Lorida 33706 tate & Zip		s sa _a ee.	
	(727)-367-0909 Daytime Tel	ephone number		21	
	Daytime Telephone number D. WHITE JUN 1 5 2001				

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

01 JUN 13 PH 3:51

SECRETARY OF STATE TALLAHASSEE FLORIDA

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.

ARTICLE I NAME

The name of the corporation shall be:

Cheryl's St. Pete Beach Child Care, Inc.

PRINCIPAL OFFICE ARTICLE II

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

505 79 Ave

33706 St Pete Beach , Florida

ARTICLE III

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

1,000 shares

INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Chervl Morgenstein

505 79 Ave

33706 St Pete Beach , Fl

INCORPORATOR ARTICLE V

The name and address of the incorporator to these Articles of Incorporation are:

Cheryl Morgenstein

505 79 Ave

St Pete Beach , Fl

264-37-3109

(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 om familiar with and accept the obligations of my position as registered agent