## Pol 200000 8276 Department of State

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

SUBJECT: HAPPY HARRISON FAMILY DAYCARE INC.,
CROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

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  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED	
FROM:	2306 R. 1114h	inted or typed)  BO  ddress	00047822 -01/17/0201 *******78.75	2681 058009 *****78.75
ث	813971-7	State & Zip  State & Zip  State & Zip		SE CRETY DIVISION O
				- 93 <u>-</u>

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:  HAPPY HARRISON FAMILY DAYGARE	INC *
ARTICLE II PRINCIPAL OFFICE	2020
The principal place of business/mailing address is:  2306 R. 111 H. AVC  TAMPA, PL 33612	OZ JAN 17 P
ARTICLE III PURPOSE  The purpose for which the corporation is organized is:  Operatl a FAMILY HOME DAYCARES	3: 22
ARTICLE IV SHARES The number of shares of stock is: 5   Shares	
ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)  The name(s), address(es) and title(s):  Leo A HARRISON P/D  2306 R. 1114 Ave	
TAMPA FL 33412  ARTICLE VI REGISTERED AGENT  The name and Florida street address of the registered agent is:  LEOIA HARUSON  2306 E. III the Ave	
2306 E. [[] The All Ample of the Incorporator is:	
Leola Harrison 2306 E. 111th Ave TAMPA, FL 33612	·
**************************************	**************************************
certificate, I am familiar with and accept the appointment as registered agent and agree to ac	
Leolu Harrison	1/11/02
Signature/Registered Agent	1/11/02
Signature/Incorporator	Date