

P020000016858

February 11, 2002

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

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-02/11/02--01047--003
*****70.00 *****70.00

SUBJECT: LOCICERO CHILD CARE INC.

Enclosed is an original and one (1) copy of the articles of incorporation and a check for \$70.00 representing the Filing Fee..

From:

James E. Marci
108 Commercial Way
Spring Hill, FL 34606
352-684-1800

FILED
02 FEB 11 AM 9:01
SECRETARY OF STATE
TALLAHASSEE FLORIDA

C3-014-02 ✓
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**ARTICLES OF INCORPORATION
OF
LOCICERO CHILD CARE INC.**

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:
LOCICERO CHILD CARE INC.

ARTICLE II PRINCIPAL OFFICE

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

13044 DELWOOD ROAD
TAMPA, FLORIDA 33624

ARTICLE III SHARES

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

1000 SHARES OF COMMON STOCK, EACH SHARE HAVING A
PAR VALUE OF ONE DOLLAR (\$1.00)

ARTICLE IV INITIAL REGISTERED AGENT

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

JAMES E. MARCI
108 COMMERCIAL WAY
SPRING HILL, FL 34606

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ARTICLE V INCORPORATOR

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

JAMES E. MARCI
108 COMMERCIAL WAY
SPRING HILL, FL 34606

ARTICLE VI OFFICERS & DIRECTORS

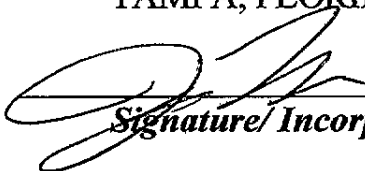
The name of the initial officer and director of the corporation are:

CHADWICK LOCICERO
10441 LA MIRAGE COURT
TAMPA, FLORIDA 33615

PRES./ DIRECTOR

MICHELLE LOCICERO
10441 LA MIRAGE COURT
TAMPA, FLORIDA 33615

SEC./TREAS./DIRECTOR



Signature/ Incorporator

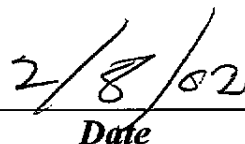


Date

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 am familiar with and accept the obligations of my position as registered agent.



Signature/ Registered Agent



Date