# P020000118608

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

SUBJECT: Louing Touch Child Care (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)			
(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)			
		7	0000492564 -02/14/0201042- *****87.50 ****
Enclosed is an original	al and one(1) copy of the article	es 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: Louing Touch Child Care Name (Printed or typed)			
415 Verh St Address			
ForT Walton Beach 71 32547 City, State & Zip			
P50-862-6117 Daytime Telephone number			

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



# ARTICLES OF INCORPORATION

**ARTICLE I NAME** 

Loving Touch Child Care "Inc.

# OZFEB 14 PAIZ: 12

# ARTICLE II PRINCIPAL OFFICE

Loving Touch Child Care 415 Verb St. Fort Walton Beach FL 32547 (850)862-6117

### ARTICLE III PURPOSE

Child Care; To give the Loving Touch to the children while the parents are away or at work

# ARTICLE IV SHARES

2 Shares

# ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

Melinda L. Ciepiela 9065 Alton CT Milton FL 32583

Wayne R. Ciepiela 9065 Alton CT Milton FL 32583

### ARTICLE VI REGISTERED AGENT

Melinda L. Ciepiela 9065 Alton CT Milton FL 32583

### ARTICLE VII INCOPORATOR

Melinda L. Ciepiela 9065 Alton CT Milton FL 32583

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

Signature/Registered Agent

Signature/Incorporator

Date

Doto