

TRANSMITTAL LETTER

P02000019706

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

200004949062--4  
-02/18/02--01031--027  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

SUBJECT: POOH CONNOR DAY CARE INC  
(PROPOSED 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

☐ \$87.50  
Filing Fee,  
Certified Copy  
& Certificate of  
Status

ADDITIONAL COPY REQUIRED

FROM: MIRYAM ESPINOSA  
Name (Printed or typed)

4075 W 18th #909  
Address

DAIALEAH, FL 33012  
City, State & Zip

(305) 824-9242  
Daytime Telephone number

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

02 FEB 18 AM 10:59

FILED

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)

FILED  
02 FEB 18 AM 10:59  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## ARTICLE I NAME

The name of the corporation shall be:

POOH CONNER DAY CARE INC.

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

4675 W 18 CT #909 HIALEAH, FL 33012

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is: THE CORPORATION IS ORGANIZED FOR THE PURPOSE OF ENGAGING IN ANY ACTIVITIES OR BUSINESS PERMITTED UNDER THE LAWS OF THE UNITED STATES AND THE STATE OF FLORIDA.

## ARTICLE IV SHARES

The number of shares of stock is:

SHARES (500) ONE DOLLARS (\$1.00 PER VALUE COMMON STOCK WHICH SHALL BE DESIGNATED COMMON SHARES.

## ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

MIRYAM ESPINOSA - PRESIDENT.

NILIA GARCIA - VICEPRESIDENT.

## ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

4675 W 18 CT #909 HIALEAH, FL 33012.

MIRYAM ESPINOSA

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

MIRYAM ESPINOSA

4675 W 18 CT #909 HIALEAH, FL 33012

\*\*\*\*\*  
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

Incorporator

Date

12-13-01