PORCOSSISTALISTER 83

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

SUBJECT:	INFANT (PROPOSED CORPORA)	DEVELOPMENT COR		·
Enclosed are an original \$70.00 Filing Fee	two (2) copies nal and one (1) copy of the artic \$78.75 Filing Fee & Certificate of Status		KK\$87.50 Filing Fee, Certified Copy	797——2 01074—012 *****87.50
		ADDITIONAL CO	& Certificate of Status PPY REQUIRED	
FROM:	4760 NW 167 St	(Printed or typed)		
-	MIAMI, FL 3301 City, (305) 620-9972	Address L4 State & Zip Celephone number	· · · · · · · · · · · · · · · · · · ·	FILED SECRETARY OF STATE TALLAHASSEE, FLORID 02 MAY -2 PM 1:20

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

BRegistus 18 W-13136

ARTICLES OF INCORPORATION

In Compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I - NAME

The Name of the corporation is INFANT DEVELOPMENT CORPORATION

ARTICLE II - PRINCIPAL OFFICE

The principal place of business/mailing address is:

4760 NW 160 Street Miami, FL 33014

ARTICLE III - PURPOSE

The purpose for which the corporation is organized is to engage in any and all activity 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 one (1).

ARTICLE V - INITIAL OFFICERS/DIRECTORS			53
President/Treasurer	E. J. McKenzie 4760 NW 160 Street Miami, FL 33014	NY-2 PI	ENERGE STREET
Vice President/CEO	Christopher Dunnum	سنند سید	STS

4760 NW 160 Street Miami, FL 33014 75

ARTICLE VI - REGISTERED AGENT

The name and Florida street address of the Registered Agent is:

Christopher Dunnum 4756 NW 167 Street Miami, FL 33014

ARTICLE VII - INCORPORATOR

The name and address of the Incorporator of the Corporation is E. J. McKenzie, whose address shall be the same as the principal office of the Corporation.

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

Date

Signature/Incorporator

Date

SECRETARY OF STATE,
TALLAHASSEE, FLORID,
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