## PODOGO ATER 2 PILED

02 AUG 21 AM 10: 00 Department of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 \*\*\*\*\*78.75 \*\*\*\*\*78.75 Enclosed are an original and one (1) copy of the articles of incorporation and a check for: \$70.00 **X** \$78.75 \$78.75 \$87.50 Filing Fee Filing Fee Filing Fee Filing Fee, & Certificate of Status & Certified Copy Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED FROM: Name (Printed or typed)

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
ARTICLE I NAME The name of the corporation shall be:	02 AUG 21 AM 10: 00
•	SECRETARY OF STATE
Learning Links Academy Inc	TALLAHASSEE FLORIDA
ARTICLE II PRINCIPAL OFFICE	
The principal place of business/mailing address is:	
5552 Lasaye Ct	
New Port Richey 71, 34652	
ARTICLE III PURPOSE  The purpose for which the corporation is organized is:	*
Opening of a child come Center.	
ARTICLE IV SHARES The number of shares of stock is:	n r mā
100	
ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)	
The name(s), address(es) and title(s):	· · · · · · · ·
Amy Doyle (Director Jowner)	
7619 Seashore Dr	
Port Richey 71 34668	· · · · · · · · · · · · · · · · · · ·
ARTICLE VI REGISTERED AGENT	and the second of the second o
The name and Florida street address of the registered agent is:	
Amy Doyle	· -
7619 Seashore or.	
ARTICLE VII INCORPORATOR 34668	
The name and address of the Incorporator is:	
Amy Dayle	
71019 Seashore Dr.	
Port Richey 71 34668	***************
Having been named as registered agent to accept service of process for the above stated corporate certificate, I am familiar with and accept the appointment as registered agent and agree to act in the service of process for the above stated corporate certificate.	tion at the place decimeted in this
Mry C Do	7-12-02
Signature/Registered Agent	Date
$\sim$	
my Juste	7-12-02
Silgnature/Incorporator)	Date