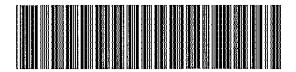
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(Requestor's Name)				
(Ad	dress)			
(Ad	dress)	٠		
(Cit	y/State/Zip/Phone	· #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
	`			
(Do	cument Number)			
		\.		
Certified Copies Certificates of Status				
Special Instructions to	Filing Officer:			

Office Use Only



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SEGMENT OF STATE
TAILAHAS LEE FLORID

11-18,00

TRANSMITTAL LETTER

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

SUBJECT:	C & H CHILD CARE CENTER, INC.			
	(PROPOSED CORPORA	TENAME - MUSTINGE	ODESDIEDX)	
		•		
Enclosed are an orig	ginal and one (1) copy of the art	icles of incorporation an	d a check for:	
□ \$70.00 Filing Fee	□ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	*1 \$87.50 Filing Fee, Certified Copy & Certificate of Status DPY REQUIRED	
FROM:	C & H CHILD CARE CE Name	NTER INC		
	Name	(Frimed or typed)		
	813 10th STREET	•		
		Address		
		.*		
	St. Cloud, Florida		•	
	City,	State & Zip	÷	
	407 892-5000	elephone number		
	1 Sumbert	CHEVILLING GOVERNMENT		

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)

ARTICLE I NAME

The name of the corporation shall be:

C & H CHILD CARE CENTER, INC

FILED

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SCURLIANT OF STATE TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

813 10th STREET

ST. CLOUD, FLORIDA 34769

ARTICILE III PURPOSE

The purpose for which the corporation is organized is:

To operate a child care center

ARTICLE IV SHARES

The number of shares of stock is:

200

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

Clayton L Worley

5652 Jack Brack Road

St. Cloud, Florida 34771

ARTICLE VI REGISTERED AGENT

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

Clayton L Worley

5652 Jack Brack Road

St Cloud, Florida 34771.

ARTICLE VII INCORPORATOR

The name and address of the incorporator is:

Clayton L Worley

5652 Jack Brack Road

St Cloud, Florida 34771

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

10/11/02 Date 10/11/02

Signature/Incorporator