2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000063077

FILED Sep 27, 2007 Secretary of State

Entity Nar	ne: FATHER	& DAUGHTERS NURSERY, I	NC.		
Current P	rincipal Place	of Business:	New Principal Place	New Principal Place of Business:	
210 SW 62 MIAMI, FL					
Current Mailing Address:			New Mailing Address	New Mailing Address:	
15953 SW MIAMI, FL	74TH STREE [*] 33199	Т	210 SW 62 AVENUE MIAMI, FL 33144		
FEI Number:	20-0136836	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of C	urrent Registered Agent:	Name and Address o	Name and Address of New Registered Agent:	
SAN JUAN 210 SW 62 MIAMI, FL The above in the State	AVENUE 33144 US	submits this statement for the p	ourpose of changing its registered	d office or registered agent, or both,	
SIGNATUR	RE: LUCIA SA	NJUAN			
	Electron	ic Signature of Registered Age	ent	Date	
		3(2)(b), F.S., the corporation did no g Trust Fund Contribution ().	ot receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGI	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () SAN JUAN, LUC 210 SW 62 AVE MIAMI, FL 331	ENUE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP () SAN JUAN, JOA 210 SW 62 AVE MIAMI, FL 331	ENUE	Title: Name: Address: City-St-Zip:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LUCIA SANJUAN Ρ 09/27/2007