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# TRANSMITTAL LETTER

Department of State Division of Corpora P. O. Box 6327 Tallahassee, FL 323			· · · · · · · · · · · · · · · · · · ·	
SUBJECT: V.V.	F.S. Inc. (PROPOSED CORPORA)	TE NAME – <u>Must Incl</u> i	UDE SUFFIX)	<u>-</u>
Enclosed are an orig	inal and one (1) copy of the artic	cles of incorporation and	a check for:	
□ \$70.00 Filing Fee	☑ \$78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED	
FROM:	Tracy L. Smith	(Printed or typed)		
	1112 SW 11th Avenue			
	Cape Coral, FL 33991 City,			
	(239) 458-2892			
	Daytime Telephone number			

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: V.V.T.S. Inc.

# ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: Kids Kountry Preschool 2303 SE 15th Place Cape Coral, FL 33990

#### ARTICLE III PURPOSE

The purpose for which the corporation is organized is: profit child care center

# ARTICLE IV SHARES

The number of shares of stock is: 100

# ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s): Tracy L. Smith 1112 SW 11th Avenue Cape Coral, FL 33991

#### ARTICLE VI REGISTERED AGENT

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

Tracy L. Smith 1112 SW 11th Avenue Cape Coral, FL 33991

# ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Tracy L. Smith 1112 SW 11th Avenue Cape Coral, FL 33991

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 Trocy L. Smith

Date

7/18/2003

May Smith 7/18/2003
Signature/Incorporator Tracy L. Smith Date

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TALLAH/SSEC. "LORIDA"