

PD4000038000

(Requestor's Name)

- Shonda L. Whitaker  
- 6362 Kadner Dr.  
- Jax. Fl. 32210

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

✓ D. WHITE MAR - 1 2004

Office Use Only



900025705559

01/27/04 - 01021 -- 012 \*\*78.75

FILED

2004 FEB 27 P 3:22

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## TRANSMITTAL LETTER

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

78.75

SUBJECT: LITTLE FRENCHES DAY CARE/LEARNING CENTER, INC  
(Proposed corporate name - must include suffix)

Enclosed is an original and one (1) copy of the articles of incorporation and a check for :

☐ \$70.00  
Filing Fee

☒ \$78.75  
Filing Fee  
& Certificate

☐ \$122.50  
Filing Fee  
& Certified Copy

☐ \$131.25  
Filing Fee,  
Certified Copy  
& Certificate

FROM: SHANDA WHITAKER  
Name (printed or typed)

6362 BADNUR DRIVE  
Address

JACKSONVILLE, FLORIDA 32210  
City, State & Zip

904 695-4331  
Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood  
Secretary of State

February 4, 2004

SHANDA WHITAKER  
6362 BADNUR DR  
JACKSONVILLE, FL 32210

SUBJECT: LITTLE FRENCHES DAY CARE/LEARNING CENTER, INC.  
Ref. Number: W04000004937

We have received your document for LITTLE FRENCHES DAY CARE/LEARNING CENTER, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Registered agent acceptance and signature required. Incorporator signature required.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6933.

Dale White  
Document Specialist  
New Filings Section

Letter Number: 704A00007628

RECEIVED

04 FEB 27 PM 4:52

FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA 32314

**ARTICLES OF INCORPORATION**  
**OF**

**FILED**

2004 FEB 27 P 3: 22

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

LITTLE FRENCHES DAY CARE/LEARNING CENTER, INC

*The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.*

**ARTICLE I NAME**

The name of the corporation shall be:

LITTLE FRENCHES DAY CARE/LEARNING CENTER, INC

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business and mailing address of this corporation shall be:

6362 BADNUR DRIVE  
JACKSONVILLE, FLORIDA 32210

**ARTICLE III SHARES**

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

2,000 SHARES @ \$1.00 PER SHARE

**ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS**

The name and address of the initial registered agent is:

SHANDA WHITAKER  
6362 BADNUR DRIVE  
JACKSONVILLE, FLORIDA 32210

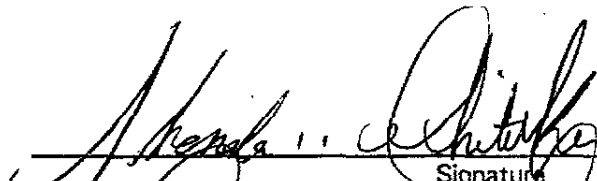
**ARTICLE V INCORPORATOR(S)**

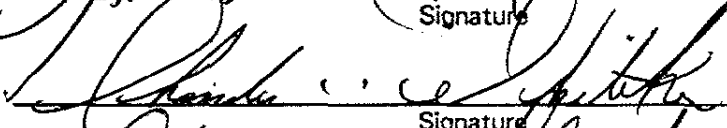
The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

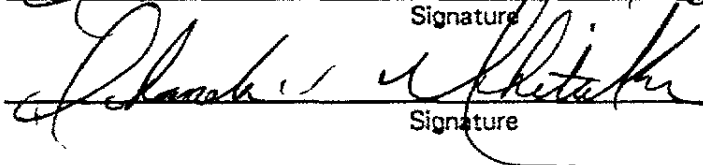
SHANDA WHITAKER  
6362 BADNUR DRIVE  
JACKSONVILLE, FLORIDA 32210

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

\_\_\_\_\_ day of \_\_\_\_\_, 2003.

  
\_\_\_\_\_  
Signature

  
\_\_\_\_\_  
Signature

  
\_\_\_\_\_  
Signature

# CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 or 617.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is: LITTLE FRENCHES DAYCARE/LEARNING  
CENTER, INC

2. The name and address of the registered agent and office is:

SHANDA WHITAKER

(Name)

6362 BADNUR DRIVE

(P.O. Box not acceptable)

JACKSONVILLE, FLORIDA 32210

(City/State/Zip)

*Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.*

Signature

Date

FILED  
2004 FEB 27 P 3:22  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE