# P0400063183

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
(City/State/Zlp/Priorie #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					

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JL APR 12 PM 4: 50

OR US

# TRANSMITTAL LETTER

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

UBJECT:	Wee Kare Academy, Inc			
•	(PROPOSED CORPOR	ATE NAME – MUST INCO	<u>udasuaax</u> )	
losed are an orig	inal and one (1) copy of the ar	ticles of incorporation and	a check for:	
\$70.00 Filing Fee	☑ \$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy	S87.50 Filing Fee, Certified Copy & Certificate of Status	
FROM:	Apri Nam	ADDITIONAL CO	PT REQUIRED	
	944	8 141st Dr. Address		
	Live C	Pak. FL 32060 y, State & Zip		
	386-3	62-3340 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:

Wee Kare Academy, Inc.

# <u>ARTICLE II PRINCIPAL OFFICE</u>

The principal place of business/mailing address is:

519 South Ohio

Live Oak, FI 32064

# ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To Conduct All and Any Legal Business Activities allowed by the State Of Florida

# <u>ARTICLE IV</u> SHARES

The number of shares of stock is:

100sh @ \$ 1.00 per share

## ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

**April Waters** 

9448 141st Dr

Live Oak,FI 32060

President

### ARTICLE VI REGISTERED AGENT

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

Sadie Pettrey

14293 111th Place

McAlpin,Fl 32062

### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

**April Waters** 

9448 141st Dr.

Live Oak, FI 32060

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

Sadie (ettrue 4-9-04
Signature/Registered Agent)
Date

Signature/Incorporator

Date

OU APR 12 PM 4:50
ALLAHASSEE FLORIDA