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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

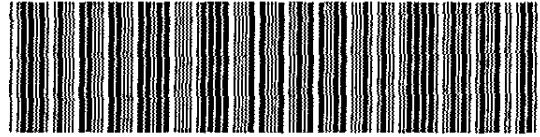
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

7506/04/04

original

TRANSMITTAL LETTER

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

SUBJECT: Liberty Academy Daycare And Preschool, Inc.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

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

\$70.00 Filing Fee
 \$78.75 Filing Fee & Certificate of Status

\$78.75 Filing Fee & Certified Copy
 \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED

FROM: Sarah Brazier
Name (Printed or typed)

1945 NW 168 Ave.
Address

Pembroke Pines, FL 33028
City, State & Zip

954-885-8785
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:
Liberty Academy Daycare And Preschool, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/ mailing address is:
7750 NW 12th Ave.
Miami, Florida 33150

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
Provide childcare and preschool services for the community.

ARTICLE IV SHARES

The number of shares of stock is:
1,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):
Sarah Brazier
President and CEO
1945 NW 168 Ave.
Pembroke Pines, Florida 33028

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:
Sarah Brazier
1945 NW 168 Ave.
Pembroke Pines, Florida 33028

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:
Sarah Brazier
1945 NW 168 Ave.
Pembroke Pines, Florida 33028

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

Sarah Brazier
Signature/Registered Agent

5/26/04
Date

Sarah Brazier
Signature/Incorporator

5/26/04
Date

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TALLAHASSEE, FLORIDA