

PO4000097695

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

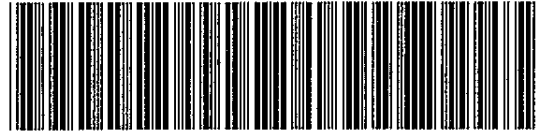
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Handwritten signature/initials

TRANSMITTAL LETTER

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

SUBJECT: Kidz Carousel Daycare Center Corporation
(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 of Status

☐ \$78.75
Filing Fee
& Certified Copy

☒ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM:

Kidz Carousel Daycare Center Corp.
Name (Printed or typed)

5450 County Road 581 #356
Address

Wesley Chapel Florida 33543
City, State & Zip

813-964-0833
Daytime Telephone number

ellen GAVE
AUTHORIZATION BY PHONE TO
CORRECT VI
DATE 6/28/04
DOC. EXAM VI

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: Kidz Carousel Daycare Center Corp.

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04 JUN 25 PM 4:03
CLERK OF STATE
TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is: 5450 County Road 581 #356
Wesley Chapel FL 33543

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To provide a positive, nurturing and safe environment for early child care as well as after school care.

ARTICLE IV SHARES

The number of shares of stock is: 500 shares @ \$10.00 per-value

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s): Ellen La Shawn Nealy - Director
10063 Lake Oak Circle
Tampa FL 33624

ARTICLE VI REGISTERED AGENT

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

Brigitte Nealy: 4306 E. Powhatan Ave Tampa FL 33610

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Ellen La Shawn Nealy
10063 Lake Oak Circle - Tampa FL 33624

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

Date

Signature/Incorporator

Date