

PO4000103607

Heish L Quors
(Requestor's Name)

8121 Chris LN
(Address)

(Address) (850) 421-1052

Tallahassee FL 32305
(City/State/Zip/Phone #)

☐ PICK-UP ☒ WAIT ☐ MAIL

Credible for creation child case cover.
(Business Entity Name)

(Document Number)

Certified Copies 1 Certificates of Status 1

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DIVISION OF CORRECTIONS

7/13/04

TRANSMITTAL LETTER

FILED

2004 JUL 13 PM 12:50

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

SECRETARY OF STATE
TALLAHASSEE FLORIDA

SUBJECT: Cradle to cradle Child care Center, 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: Heather & Michael Davis
Name (Printed or typed)

8121 Chris Ln
Address

Tallahassee FL 32305
City, State & Zip

(850) 575-2526
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:

Cradle to cradles Childcare Center - Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

8121 Chris Ln Tallahassee
Fl. 32305

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

and and all Lawfull bussiness's
in the State of Florida

ARTICLE IV SHARES

The number of shares of stock is:

1

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Michael L Davis - Director

Heisha L Davis - Secretary

ARTICLE VI REGISTERED AGENT

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

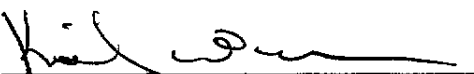
Michael L Davis
8121 Chris Ln
Tallahassee Fl. 32305

ARTICLE VII INCORPORATOR

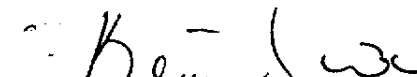
The name and address of the Incorporator is:

Heisha Davis
8121 Chris Ln
Tallahassee Fl. 32305

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

7-13-04
Date


Signature/Incorporator

7-13-04
Date

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CLERK OF STATE
TALLAHASSEE FLORIDA