

P 050000/6382

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

(Business Entity Name)

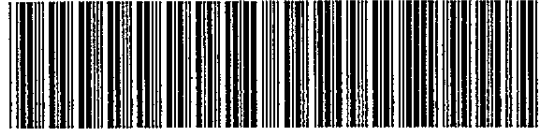
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01/05/05--01013--006 **78.75

APPROVED
AND
FILED
05 FEB -1 AM 8:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1005-1085

TRANSMITTAL LETTER

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

SUBJECT: Ms. Chris Inc dba Bumble Bee Preschool

(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: CHRISTINE HENRY

Name (Printed or typed)

3844 CARIOCA RD.

Address

HOLIDAY FLORIDA

City, State & Zip

727-735-0401

727-423-3720
Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

January 21, 2005

CHRISTINE HENRY
3844 CARIOCA RD
HOLIDAY, FL

SUBJECT: MS. CHRIS INC.
Ref. Number: W05000000685

We have received your document for MS. CHRIS 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):

You failed to make the correction(s) requested in our previous letter.

A corporation may not act as its own incorporator. Please designate an individual, another active domestic or foreign corporation, with a street address.

The person designated as registered agent in the document and the person signing as registered agent must be the same.

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) 245-6925.

Cynthia Blalock
Document Specialist
New Filings Section

Letter Number: 005A00000749

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:

BUMBLE BEE PRESCHOOL INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

MAILING ADDRESS 3844 CARIOCA RD.

HOLIDAY, FL. 34691

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

SMALL BUSINESS

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):

CHRISTINE HENRY OFFICER AND DIRECTOR

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Christine Henry

3844 CARIOCA RD.

HOLIDAY, F.

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Christine Henry

3844 CARIOCA RD.

HOLIDAY, FL. 34691

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

Christine Henry

Signature/Registered Agent

12/23/04

Date

effective da.
Jan 1, 05

Christine Henry

Signature/Incorporator

12/23/04

Date