P05000027345

Harold Miles (Requestor's Name)
(Requestor's Name)
3175 Wentworth St
(Address)
(Address)
North Port Fl 34288 (939)841
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
Extended Childcaro Services INC (Business Entity Name)
(Business Entity Name)
(Document Number)
! / /
Certified Copies Certificates of Status
Consideration of Fillmont
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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: Extended Childcare Services Inc.
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: 1021 SE 15 ST GainesVIII E FIA 32614/19 SE 49th DR CounesVIIIE FIA ARTICLE III PURPOSE
The purpose for which the corporation is organized is: To offer Child Care Services, Elderly Services and Employment opportunity to economically disadvantage Communities ARTICLE IV SHARES The number of shares of stock is: 2,000,000
List name(s), address(cs) and specific title(s): Harold MIES 3175 Wentworth St North Port F134288 President Harold MIES 3175 Wentworth St North Port F134288 President Frances Rollins 5401 SW 62Nd AVE Gainesville F1A 32408 Vice President Frances Rollins 5401 SW 62Nd AVE Gainesville F1A32257 Secretary Aaron Burkett 10958 Horse track DR Jacksonville F1A32257 Secretary Beverly Burkett10958 Horse track DR Jacksonville F1A32257 Tresurer Beverly Burkett10958 Horse track DR Jacksonville F1A32257 Tresurer ARTICLE VII REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: Alachua F1A 32415 ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Harold E MIBS H St North Port F1A 34288
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 Alkeena Staten 210 05 Signature/Registered Agent Date
Harold Miles Signature/Incorporator Harold Miles Date