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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

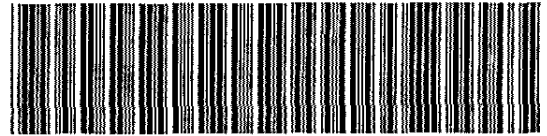
(Business Entity Name)

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TALLAHASSEE, FLORIDA

5/23/05
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TRANSMITTAL LETTER

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

SUBJECT: KidVenture Learning 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: CARLETTA DAVIS-WILSON
Name (Printed or typed)

912 Johns Cove Lane
Address

Oakland FL 34787
City, State & Zip

407-443-5658
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:

KidVenture Learning Center, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

P.O. Box 607263
Orlando, FL 32860

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Learning Center /Child Care

ARTICLE IV SHARES

The number of shares of stock is: 7500.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Carletta Davis-Wilson, Director
912 Johns Cove Lane
Oakland, FL 34787

TODD D. Wilson, Director
912 Johns Cove Lane
Oakland, FL 34787

ARTICLE VI REGISTERED AGENT

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

Carletta Davis-Wilson
912 Johns Cove Lane
Oakland, FL 34787

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Carletta Davis-Wilson
912 Johns Cove Lane
Oakland, FL 34787

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

Carletta Davis-Wilson
Signature/Registered Agent

5-16-05
Date

Carletta Davis-Wilson
Signature/Incorporator

5-16-05
Date

FILED
05 MAY 20 PM 2:48
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

May 16, 2005

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

FILED
05 MAY 20 PM 2:48
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RE: KidVenture Learning Center, Inc. (N04000000131)

This affidavit makes known that Carletta Davis-Wilson, will not use the name KidVenture Learning Center, Inc. again as a non-profit corporation. I am releasing this name and therefore making it available for a new business entity.

If you should have any questions, please contact me at 407-443-5658.

Sincerely,

Carletta Davis-Wilson

Carletta Davis-Wilson

on May 16, 2005

The above: Carletta Davis-Wilson signed.

