POS0001373

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SECRETARY OF STATE DIVISION OF CORPORATION

COVER LETTER

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

SUBJECT: Phoenix Down Child Care		
(PROPOSED CORPORA)	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an original and one (1) copy of the artic	cles of incorporation and	l a check for:
☐ \$70.00	S78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED
FROM: Capricia Mariah Nixon		
Name ((Printed or typed)	
7580 Somerton Dr		
Jacksonville FL 32210	address	
	State & Zip	
904-317-6452 Daytime To	elephone 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:

Phoenix Down Child Care, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

7580 Somerton Dr. Jax. FL 32210

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To operate a child care.

ARTICLE IV SHARES

The number of shares of stock is:

100

ار.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Capricia M. Nixon, President PO Box 54585 Jax. FL 32245 Sheila D. Carey, Secretary PO Box 54585 Jax. FL 32245

ARTICLE VI REGISTERED AGENT

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

Capricia M. Nixon 7580 Somerton Dr. Jacksonville FL 32210

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Capricia M. Nixon 7580 Somerton Dr. Jacksonville FL 32210

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

12/22/2005 Signature/Registered Agent Date 12/22/2005 Date Signature/Incorporator