

PO6000150936

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

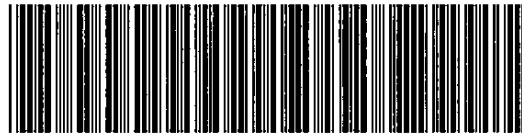
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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12/06/06--01012--006 **78.75

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06 DEC -6 AM 10:23
STATE
TALLAHASSEE FL 32301

COVER LETTER

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

SUBJECT: **KIDDIE WORLD DAY CARE 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: **Beatriz E Ducasse**

Name (Printed or typed)

213 Samuel Street

Address

Davenport, FL 33897

City, State & Zip

(863) 236-3155

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:

KIDDIE WORLD DAY CARE INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

213 Samuel Street
Davenport, FL 33897

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To run a Day Care Business

ARTICLE IV SHARES

The number of shares of stock is:

100 shares @ \$1 par-value

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Beatriz E Ducasse - President (213 Samuel Street, Davenport FL 33897)
Manuel A Ducasse - Vice President (213 Samuel Street, Davenport FL 33897)
Beatriz E Ducasse - Secretary (213 Samuel Street, Davenport FL 33897)

ARTICLE VI REGISTERED AGENT

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

Beatriz E Ducasse
213 Samuel Street
Davenport, FL 33897

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Beatriz E Ducasse
213 Samuel Street
Davenport, FL 33897

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 *BEATRIZ E DUCASSE*

12/04/06

Date

Signature/Incorporator *BEATRIZ E DUCASSE*

12/04/06

Date

FILED
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA