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| (Requestor's Name) | | | |
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| PICK-UP | WAIT | MAIL | |
| (Bu | siness Entity Nan | ne) | |
| ` | • | ·· , | |
| (Document Number) | | | |
| Certified Copies | _ Certificates | of Status | |
| Special Instructions to Filing Officer: | | | |
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TATE OF STATE SECULIARY OF STATE

Office Use Only

COVER LETTER

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

| SUBJECT: | HUGS & KISSES CHILDCARE & PRESCHOOL, INC. | | | | |
|---------------------|---|-----------------------------|---|--|--|
| | (PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX) | | | | |
| | | | | | |
| | | | | | |
| Enclosed are an ori | ginal and one (1) copy of the arti | icles of incorporation and | d a check for: | | |
| \$70.00 | \$78.75 | \$78.75 | \$87.50 | | |
| Filing Fee | Filing Fee & Certificate of Status | Filing Fee & Certified Copy | Filing Fee, Certified Copy & Certificate of | | |
| | | ADDITIONAL CO | Status | | |
| | | | 11-51 | | |
| FROM: | ACCOUNTIN | | | | |
| | Name | (Printed or typed) | | | |
| | 1964 INDIANOLA AVE | | | | |
| | Address | | | | |
| | DES MOINES, IA. 50315 | | | | |
| - | City, State & Zip | | | | |
| | (515) 2 | 283-1040 | | | |
| | Daytime Telephone number | | | | |

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

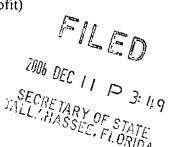
ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

HUGS & KISSES CHILDCARE & PRESCHOOL, INC.



ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

2626 MARTHA LANE LAND OF LAKES, FL. 34639

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

THE TRANSACTION OF ANY OR ALL LAWFULL PURPOSES FOR WHICH CORPORATIONS MAY BE INCORPORATED UNDER THE FLORIDA BUSINESS ACT.

ARTICLE IV SHARES

The number of shares of stock is:

1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

JAYNE SHORT 2626 MARTHA LN - LAND OF LAKES, FL. 34639 PRES, SEC, TREAS, DIRECTOR

PAUL SHORT 2626 MARTHA LN - LAND OF LAKES, FL. 34639 VICE-PRESIDENT, DIRECTOR

ARTICLE VI REGISTERED AGENT

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

PAUL SHORT 2626 MARTHA LN - LAND OF LAKES, FL. 34639

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

PAUL SHORT 2626 MARTHA LN - LAND OF LAKES, FL. 34639

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/Incorporator

11/26/06

Date