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DIVISION OF CORPORATION

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CORPORATION NAME(S) & DOCUM	MENT NUMBER(S), (if known):
NEW DAY CARE	, INC.
(Corporation Name)	(Document #)
2.	
(Corporation Name)	(Document #)
3	
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OTHER FILINGS	REGISTRATION/QUALIFICATION
Annual Report	☐ Foreign
☐ Fictitious Name	Limited Partnership
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CP2E/21/2/02)	Examiner's Initials
CR2E031(7/97)	

DIVISION OF CORPORATION:

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ARTICLES OF INCORPORATION

The undersigned Incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

<u>ARTICLE I – NAME</u>

The name of the corporation shall be:

New DAY Care, INC.
ARTICLE II - PRINCIPAL OFFICE

The principal place of business and mailing of this corporation shall be:

109.90 SW 216 ST MIAMI FL 33170

ARTICLE III - SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

100

ARTICLES IV - INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

YOANIS CHIRINO 10980 SW 216 ST MIAMI, FL, 33170

BECRETARY OF SILES BIVISION OF CORPORATION 07 JUN 25 AM 11: 45

ARTICLE V - INCORPORATOR

The name and street address of the incorporator to these Articles of Incorporation is:

YOANIS CHIRINO 10980 SW 216 ST NIAMI EL 33170

MIAMI, FL 33170

The undersigned incorporator has executed these Articles of Incorporation this 22 day of 33170 2007

Signature

ARTICLE VI- DIRECTOR(S)

The name(s) and street address (es) of the director(s) to these Articles of Incorporation is (are):

YOANIS Chirino - President. 10980 SW 216 ST

MIAMI, FL, 33170

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT / REGISTERED OFFICE

Having been named as Registered Agent and to accept service of process for the above stated corporation at place designated in this certificate, I hereby accept the appointment as Registered Agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes related to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as Registered Agent.

Registered Agent Signature