

P07000111424

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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117000111424

COVER LETTER

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

SUBJECT: INFANT DREAMS DAYCARE 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: OLGA L MENDEZ

Name (Printed or typed)

541 E 9TH ST

Address

HIALEAH, FL 33010

City, State & Zip

786-543-9409

Daytime Telephone number

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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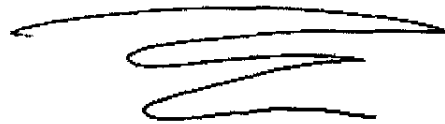
FILED

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

Att: Dayane.
From: Yaslee Wilson

As per conversation, please File the following article, As per president Request Raul Delgado has nothing to Due with the Filling. President don't want him to be on non of the documents. if you have any Question Contact Olga menacé @ (786)543-9409.

Thank you for u help.



Yaslee Wilson

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

The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE

The principal place of business/ mailing address is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ARTICLE IV SHARES

The maximum number of shares, which the corporation is authorized to issued and have outstanding, at any one time, is 100 shares of common stock, which shares shall be of non per value. All stock is to be issue as fully paid and exempt from assessment.

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

Title: T
Miladis Mendez
541 E 9th ST
Hialeah, FL 33010

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

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

[illegible]

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

Signature/Registered Agent
Olga Hendz
Signature/Incorporator

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

9/25/07

Date _____

9/25/02

Date _____