

P07000113624

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

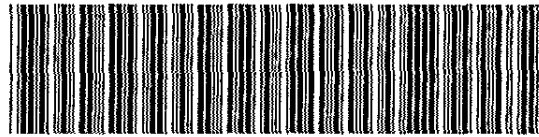
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## COVER LETTER

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

SUBJECT: Growing Blessing's Early Learning Home Care Incorporated  
(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: Chiriga Kesi Mahan

Name (Printed or typed)

113 Northeast 39th Place

Address

Gainesville, Florida 32609

City, State & Zip

352-745-2759

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:

**Growing Blessing's Early Learning Home Care Incorporated**

### **ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

113 Northeast 39th Place

Gainesville, FL 32609

### **ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Children's Daycare

### **ARTICLE IV SHARES**

The number of shares of stock is:

1

### **ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

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

Chiriga Kesi Mahan

113 Northeast 39th Place

Gainesville, FL 32609

President (CEO)

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TALLAHASSEE, FLORIDA

**ARTICLE VI REGISTERED AGENT**

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

Chiriga Kesi Mahan  
113 Northeast 39th Place  
Gainesville, FL 32609

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Chiriga Kesi Mahan  
113 Northeast 39th Place  
Gainesville, FL 32609

\*\*\*\*\*

*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*

Chiriga K. Mahan

Signature/Registered Agent

Chiriga K. Mahan

Signature/Incorporator

11/18/07

Date

11/18/07

Date

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TALLAHASSEE, FLORIDA