

P07880131359

(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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07 DEC 12 PM 3:00

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FILED

07 DEC 12 PM 3:07

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

12-12-07
CO-21-21
100

COVER LETTER

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

SUBJECT: Cradle 2 Crayons Childcare 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:

Heisha Lashon Davis

Name (Printed or typed)

8121 Chris Ln

Address

Tallahassee FL 32305

City, State & Zip

(850) 544-2541

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)

Effective Date
1-1-08

ARTICLE I NAME

The name of the corporation shall be:

Cradle 2 Crayons Childcare Center Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

1700 #17 Joe Louis St.
Tall. Fl. 32305

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Childcare Center

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):

Heisha L. Shum Davis, President

ARTICLE VI REGISTERED AGENT

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

Heisha Davis
1700 #17 Joe Louis St
Tall. Fl. 32305

ARTICLE VII INCORPORATOR


The name and address of the Incorporator is:

Heisha Davis
1700 #17 Joe Louis St
Tall. Fl. 32305

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/Incorporator

12-12-2007

Date

Date

FILED
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

12/02/07 (K)

I Keisha Davis do not intend on
revoking the dissolution on Cradle to
Crayons Childcare Center, Inc. document #
PO4000103607.