

P08000028423

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

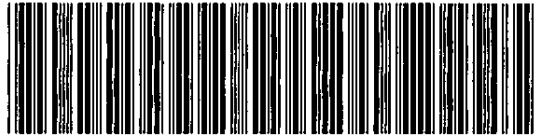
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



500118301435

02/22/08--01007--002 ++87.50

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
08 MAR 17 AM 8:35

W08000009548

ep 3/18/08

## COVER LETTER

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

SUBJECT: Jump Start Learning DayCare Corp.  
(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: Ms. DEON R. JOHNSON  
Name (Printed or typed)

3350 N.W. 189th  
Address

MIAMI GARDENS FLA 33056  
City, State & Zip

305-454-9856  
Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

February 22, 2008

DEON R. JOHNSON  
3350 NW 189 ST  
MIAMI GARDENS, FL 33056

SUBJECT: JUMPSTART LEARNING DAYCARE  
Ref. Number: W08000009548

RECEIVED  
08 MAR -3 AM 8:00  
DIVISION OF CORPORATIONS

We have received your document for JUMPSTART LEARNING DAYCARE and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The corporate name must contain a suffix that will clearly indicate that it is a corporation. Such suffixes include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

The registered agent must sign accepting the designation.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6062.

Eula Peterson  
Regulatory Specialist II  
New Filing Section

Letter Number: 508A00011338



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

March 6, 2008

DEON R. JOHNSON  
3350 NW 189 ST  
MIAMI GARDENS, FL 33056

SUBJECT: JUMPSTART LEARNING DAYCARE  
Ref. Number: W08000009548

We have received your document for JUMPSTART LEARNING DAYCARE and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

The registered agent must sign accepting the designation.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6062.

Eula Peterson  
Regulatory Specialist II  
New Filing Section

Letter Number: 508A00011338

## 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:

JumpStart Learning DayCare Corp.

### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

3350 N.W. 189 St  
Miami Gardens, FLA 33056

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

DAY CARE

### ARTICLE IV SHARES

The number of shares of stock is:

100

### ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

DEON R. JOHNSON

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
08 MAR 17 AM 8:35

**ARTICLE VI REGISTERED AGENT**

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


DEON R. JOHNSON  
3350 N.W. 189th  
MIAMI GARDENS, FL 33056

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

DEON R. JOHNSON  
3350 N.W. 189th  
MIAMI GARDENS, FLA 33056

\*\*\*\*\*  
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

2-19-08  
\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Signature/Incorporator

2-19-08  
\_\_\_\_\_  
Date

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
08 MAR 17 AM 8:35