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(Address)			
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PICK-UP WAIT MAIL			
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COVER LETTER

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

SUBJECT: Nina's Child Care for Little Angels, INC				
(PROPOSED CORPORATE NAME – <u>MUST INCLUDE SUFFIX</u>)				
Enclosed are an orig	inal and one (1) copy of the artic	cles of incorporation and	a check for:	
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status	
		ADDITIONAL CO	PY REQUIRED	
FROM: Catharina Eriksson-Kosa				
Name (Printed or typed)				
161 SE 5th Court Address				
Pompano Beach FL 33060 City, State & Zip				
954-941-1610 Daytime Telephone number				

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:

Nina's Day Care for Little Angels Inc.

ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is:

161 SE 5th Court, Pompano Beach Florida 33060

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Home Child 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): Catharina Eriksson-Kosa - President 161 SE 5th Court Pompano FL 33060

ARTICLE VI REGISTERED AGENT

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

Catharina Eriksson-Kosa - President 161 SE 5th Court Pompano FL 33060

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Catharina Eriksson-Kosa - President 161 SE 5th Court Pompano FL 33060

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

6/10/08

DIVISION OF COM SHALL