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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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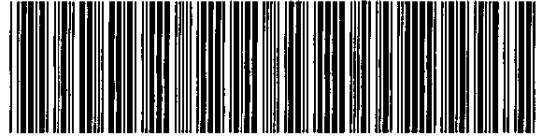
(Business Entity Name)

(Document Number)

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

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

EP 11/14/08

## COVER LETTER

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

SUBJECT: TOT SPOT PRESCHOOL ACADEMY, INC. (Tax Id/EIN: 80-0297088)  
(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: CORY L. KING AND RUTH V. MAXWELL  
Name (Printed or typed)

12289 DEWHURST CIRCLE  
Address

JACKSONVILLE, FLORIDA 32219  
City, State & Zip

407-770-8846  
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:

TOT SPOT PRESCHOOL ACADEMY, INC

## ARTICLE II PRINCIPAL OFFICE

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

12289 DEWHURST CIRCLE, JACKSONVILLE, FLORIDA 32219

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

EDUCATIONAL SERVICES

## ARTICLE IV SHARES

The number of shares of stock is:

1000

## ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

CORY L. KING 12289 DEWHURST CIRCLE, JACKSONVILLE, FLORIDA 32219 (CEO)

RUTH V. MAXWELL 12289 DEWHURST CIRCLE, JACKSONVILLE, FLORIDA 32219 (DIRECTOR)

## ARTICLE VI REGISTERED AGENT

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

RUTH V. MAXWELL 12289 DEWHURST CIRCLE, JACKSONVILLE, FLORIDA 32219

## ARTICLE VII INCORPORATOR

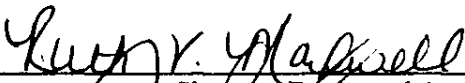
The name and address of the Incorporator is:

CORY L. KING 12289 DEWHURST CIRCLE, JACKSONVILLE, FLORIDA 32219

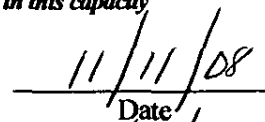
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CLERK OF STATE  
TALLAHASSEE, FLORIDA

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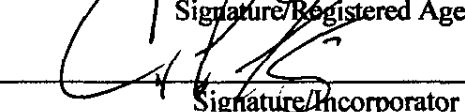
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent



Date



Signature/Incorporator



Date