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2009 MAY 12 P 4: 57

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## COVER LETTER

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

SUBJECT: KIDS CARE ACADEMY, 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: Shealy Harris  
Name (Printed or typed)

P.O. BOX 380842  
Address

MIA, FL 33238  
City, State & Zip

(786) 738-2420 / (786) 738-2620  
Daytime Telephone number

Shealykax@Hotmail.com  
E-mail address: (to be used for future annual report notification)

**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)

**FILED**

**ARTICLE I NAME**

The name of the corporation shall be:

Kios CARE Academy, INC.

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE II PRINCIPAL OFFICE**

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

1031 N.W. 108<sup>TH</sup> TRAIL  
MIAMI, FL 33168

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

CHILD CARE; EDUCATION & NUTRITION

**ARTICLE IV SHARES**

The number of shares of stock is:

1000 STOCK @ 100 per. share

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

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

Shealy & Kelvin Harris  
P.O. BOX 380842 MIA, FL 33238

**ARTICLE VI REGISTERED AGENT**

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

1031 N.W. 108<sup>TH</sup> TRAIL  
MIAMI FL 33168

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

SHEALY HARRIS & KELVIN HARRIS  
1031 N.W. 108<sup>TH</sup> TRAIL  
MIA FL 33168

\*\*\*\*\*

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

5-7-09

Date

5-7-09

Date