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(Requestor's Name)

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(City/State/Zip/Phone #)

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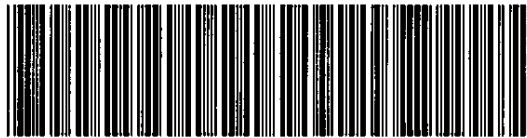
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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COVER LETTER

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

SUBJECT: Small Kids II Christian 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 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☒ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status
ADDITIONAL COPY REQUIRED

FROM: Ireal Jackson
Name (Printed or typed)

2170 NW 127St
Address

Miami, Fl. 33167
City, State & Zip

786.229.9170
Daytime Telephone number

i221@bellsouth.net
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)

ARTICLE I NAME

The name of the corporation shall be: **Small Kids II Christian Academy Inc.**

ARTICLE II PRINCIPAL OFFICE

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

2170 NW 127St
Miami, Florida 33167

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To care for preschoolers/Education

ARTICLE IV SHARES

The number of shares of stock is:

100 shares

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Ireal Jackson President
2170 NW 127 St.
Miami, Fl. 33167

ARTICLE VI REGISTERED AGENT

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

Ireal Jackson
2170 NW 127 St.
Miami, Florida 33167

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Ireal Jackson
2170 NW 127 St.
Miami, Florida 33167

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

Ireal Jackson
Signature/Registered Agent

Ireal Jackson
Signature/Incorporator

5-7-09
Date

5-7-09
Date

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09 MAY 19 AM 10:25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA