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(Re	equestor's Name)	
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(Cit	ty/State/Zip/Phon	e #)
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SECRETARY OF STATE

19 JUL 22 PH 1:4



COVER LETTER

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

SUBJECT:	Miss Pam's Playhouse, Inc.				
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	<u>UDE SUFFIX</u>)		
Enclosed are an orig	inal and one (1) copy of the arti	icles 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 CO	PY REQUIRED		
	_				
FROM:	Pamela Matarazzo Name (Printed or typed)				
	7-17-14-14-14-14-14-14-14-14-14-14-14-14-14-	NW 14 Street			
	4	Address			
	Plantation, FL 33323				
	City,	State & Zip			
	954-424-3213				
	Daytime T	elephone number			
	JMATOO	3@ Jahoo.C	On notification)		

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



AKTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

09 JUL 22 PM 1:49

ARTICLE I NAME

The name of the corporation shall be:

SECRETARY OF STATE TALLAHASSEE, FLORIDA

Miss Pam's Playhouse, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal <u>street</u> address and mailing address, if different is: 11251 NW 14 Street Plantation, FL 33323

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Daycare

ARTICLE IV SHARES

The number of shares of stock is:

500

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Pamela Matarazzo 11251 NW 14 Street Plantation, FL 33323

ARTICLE VI REGISTERED AGENT

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

Pamela Matarazzo 11251 NW 14 Street Plantation, FL 33323

ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is:

Pamela Matarazzo · 11251 NW 14 Street Plantation, FL 33323

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

1-20-0

Date

7-20-09

)ate