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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

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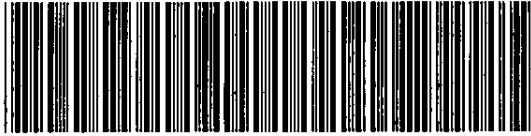
(Business Entity Name)

(Document Number)

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COVER LETTER

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

SUBJECT: LITTLE MIRACLE'S 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: LITTLE MIRACLE'S ACADEMY, INC
Name (Printed or typed)

5660 COMMERCE DRIVE SUITE # 5

Address

ORLANDO, FL 32839

City, State & Zip

(407)982-0806

Daytime Telephone number

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:

LITTLE MIRACLE'S ACADEMY, INC

ARTICLE II PRINCIPAL OFFICE

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

5660 COMMERCE DRIVE # 5
ORLANDO, FL 32839

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
TO OPERATE CHILDREN DAYCARE CENTER

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):

AUDREY D. THORNTON
5660 COMMERCE DRIVE # 5
ORLANDO, FL 32839

ARTICLE VI REGISTERED AGENT

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

AUDREY D. THORNTON
5660 COMMERCE DRIVE # 5
ORLANDO, FL 32839

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

AUDREY D. THORNTON
5660 COMMERCE DRIVE # 5
ORLANDO, FL 32839

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

Audrey D. Thornton
Signature/Registered Agent

Audrey D. Thornton
Signature/Incorporator

Nov 15-09
Date

Nov 15-09
Date

FILED
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