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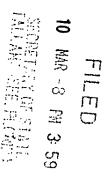
(Requestor's Name)				
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(Address)				
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(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer: # of Shares Added with permission.				
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Office Use Only

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COVER LETTER

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

			~,
SUBJECT: J	ackson Family Dayce	PAR HOME INC.	
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an o	riginal and one (1) copy of the art	icles of incorporation and	l a check for:
\$70.00	\$78.75	□ \$78.75	\$87.50
Filing Fee		Filing Fee	Filing Fee,
	& Certificate of Status	& Certified Copy	Certified Copy & Certificate of
		ADDITIONAL CO	Status
	Y	ADDITIONAL CO	A I KEQUIKED
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en i i i i i i i i i i i i i i i i i i i	· ·		
FROM:	Diana Jackson		
	Name	e (Printed or typed)	
	4002 Stuart St		
_		Address	
_	Jacksonville, FL 30	2209	
	City,	State & Zip	
, _	904-766-9072 Daytime T		
_	Daytime T	Telephone number	
_	dyanaxi-Omsvicom	ed for future annual report	
	/ E-mail address: (to be use	d for future annual report	notification)

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

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)	
ARTICLE I NAME	
The name of the corporation shall be:	
Jackson Family Daycone Home INC.	
ARTICLE II PRINCIPAL OFFICE	
The principal street address and mailing address, if different is:	
4002 Stuart St.	
Jacksonville, FL 32209	
ARTICLE III PURPOSE	
The purpose for which the corporation is organized is:	Marie Land
The purpose for which the corporation is organized is: I am opening a daywake, with the instention of open Africtitious Mames will be used under this componer	lion, but I have mot applied for ity
ARTICLE IV SHARES The number of shares of stock is:	
´ 5	5-100
List name(s), address(es) and specific title(s):	
Dist name(s), address(es) and specific title(s).	
• •	Fe o m
$m\epsilon$	
ARTICLE VI REGISTERED AGENT	ોં <u>કે</u> હ
The <u>name and Florida street address</u> (P.O. Box NOT acceptable) of	of the registered agent is: 55
Diana Jackson 4002 Stuant St Jacksonville, FL 30209	
ARTICLE VII INCORPORATOR	
The <u>name and address</u> of the Incorporator is:	
Diana Jackson 4002 Stuant St Jacksonwille, Fl 32209	
41M2 Stuart St	
Jacksonville, Fl 30209	
~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~	**********
Having been named as registered agent to accept service of proce- place designated in this certificate, I am familiar with and accep	
agree to act in this capacity	ine appointment as registered agent und
Lyana Cachen	3/4/2010 Date
Signature/Registered Agent	Date
I Jeaner Goahon	3/4/2010
Signature/Incorporator	Date

ARTICLES OF INCORPORATION