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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

J. Shivers OCT 12 2010

## COVER LETTER

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

SUBJECT: BUZY BEES LEARNING CENTER CORP.  
(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: PEARLIE M. LEWIS  
Name (Printed or typed)

2023 WARE DRIVE  
Address

WEST PALM BEACH FL 33409  
City, State & Zip

(561) 688-5765  
Daytime Telephone number

jamingpearl@aol.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)

**ARTICLE I NAME**

The name of the corporation shall be: BUZY BEES LEARNING CENTER CORP.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address  
111 SW 10th AVENUE  
DELRAY BEACH, FL 33444

Mailing address, if different is:  
2023 WARE DRIVE  
WEST PALM BEACH, FL 33409

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

ESTABLISH A DAY CARE AND LEARNING CENTER FOR CHILDREN

**ARTICLE IV SHARES**

The number of shares of stock is: 100

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

Name and Title: PRESIDENT -  
Address: PEARLIE M LEWIS  
2023 WARE DRIVE  
WEST PALM BEACH, FL 33409

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
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Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
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Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
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Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

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

Name: FLAVIO FRANCO YO FRANCO FINANCIAL COMPANY  
Address: 144 EXECUTIVE CIRCLE  
BOYNTON BEACH, FL 33436

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: PEARLIE M LEWIS  
Address: 2023 WARE DRIVE  
WEST PALM BEACH, FL 33409

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

Flavio Franco / FLAVIO FRANCO  
Required Signature/Registered Agent

10-5-10  
Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Pearlie M Lewis  
Required Signature/Incorporator

10-5-10  
Date