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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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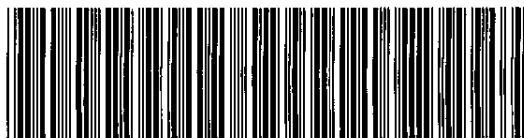
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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RECEIVED
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
2010 OCT 20 AM 10:56
NOT INTENDED
TO ACKNOWLEDGE
SUFFICIENCY OF FILING

FILED
10 OCT 20 AM 8:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PS 10/21/10

LAZARUS

CORPORATE FILING SERVICE

3320 SW 87TH AVENUE

MIAMI, FL 33165 (305) 552-5973

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CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. BIG SMILE DAY CARE Corp.
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

- ☒ Walk in ☒ Pick up time 2.00 ☒ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS

- ☒ Profit
☐ Not for Profit
☐ Limited Liability
☐ Domestication
☐ Other

AMENDMENTS

- ☐ Amendment
☐ Resignation of R.A., Officer/Director
☐ Change of Registered Agent
☐ Dissolution/Withdrawal
☐ Merger

OTHER FILINGS

- ☐ Annual Report
☐ Fictitious Name

REGISTRATION/QUALIFICATION

- ☐ Foreign
☐ Limited Partnership
☐ Reinstatement
☐ Trademark
☐ Other

Examiner's Initials

CERTIFICATE OF INCORPORATION

OF

BIG SMILE DAY CARE CORP.

FILED

10 OCT 20 AM 8:46

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

WE, the undersigned, do hereby associate ourselves together and subscribe this Certificate of Incorporation for the purpose of forming a corporation under the laws of the State of Florida, and subject to the following provisions:

ARTICLE ONE

THE NAME of the Corporation shall be:

BIG SMILE DAY CARE CORP.

THE CORPORATION may engage in any activity or business permitted under the laws of the United States and of the State of Florida.

ARTICLE TWO

THE MAXIMUM number of shares of stock which the corporation shall have outstanding at any time, shall be 100 shares of stock which shall be common stock at par value of \$1.00 per share. All or any part of the capital stock may be paid for either in lawful monies of the United States of America, or in services, at a true valuation thereof.

ARTICLE THREE

THIS CORPORATION shall begin business with a minimum capital in the amount of ONE HUNDRED DOLLARS AND 00/1.00 (\$100.00)

ARTICLE FOUR

THE CORPORATION shall have perpetual existence.

ARTICLE FIVE

THE PRINCIPAL office of the Corporation shall be located at:

2019 Madeira Dr
Weston, FI 33327

OTHER OFFICES for the transaction of business may be located wherever the Directors may deem necessary or expedient.

ARTICLE SIX

THE BUSINESS of the Corporation shall be managed by a Board of Directors, who need not be stockholders of the Corporation. The number of Directors, not less than one, shall be fixed by resolution of the stockholders at any regular or special meeting, subject to the manner of holding such meetings prescribed by the By-Laws.

ARTICLE SEVEN

THE NAMES and post office addresses of the members of the First Board of Directors and Officers who shall hold office for the first year of existence of the corporation or until their successors are elected or appointed and have qualified, are as follows:

BOARD OF DIRECTORS

Aura Y. Nucette
2019 Madeira Dr
Weston, Florida 33327

OFFICERS

Aura Y. Nucette - President, Vice-President, Secretary, Treasurer and Director

ARTICLE EIGHT

THE NAMES and post office addresses of each of the subscribers to this Certificate of Incorporation are as follows:

Aura Y. Nucette
2019 Madeira Dr
Weston, Florida 33327

ARTICLE NINE

THIS CORPORATION shall have full power to carry on and transact each or all of the businesses enumerated in Article One of this Certificate, and shall have all the general and additional powers now and hereafter conferred upon it by law.

ARTICLE TEN

THIS CORPORATION shall have the power to issue the whole or any part, determined by the Board of Directors, of the shares of the capital stock as partly said, subject to calls thereon until the whole thereof shall have been paid.

ARTICLE ELEVEN

UPON ELECTION of a Board of Directors by the stockholders, such Board of Directors shall manage the business affairs of this corporation without the necessity of further authority from the stockholders, except as by law or in this Certificate otherwise provided by the By-Laws of the Board of Directors. All holders of common stock of this corporation shall be entitled to vote the same in the manner provided by law whether said stock shall be fully or partially paid unless otherwise determined by the Board of Directors at or before the time of issuance thereof.

ARTICLE TWELVE

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TALLAHASSEE, FLORIDA

THE CORPORATION shall designate Aura Y. Nucette with offices located 2019 Madeira Drive, Weston, Florida 33327 its duly authorized Registered Agent to be in charge of the Corporate Registered Office as required by State Law.

CERTIFICATE DESIGNATING PLACE OF BUSINESS OF DOMICILE FOR THE SERVICE OF PROCESS WITHIN THIS STATE, NAMING AGENT UPON WHOM PROCESS MAY BE SERVED.

IN PURSUANCE of Chapter 49.091, Florida Statutes, the following is submitted, in compliance with said Act:


FIRST, BIG SMILE DAY CARE CORP., desiring to organize under the laws of the State of Florida with its principal office, as indicated in the Articles of Incorporation, at City of Miami, County of Dade, State of Florida, has named

Aura Y. Nucette

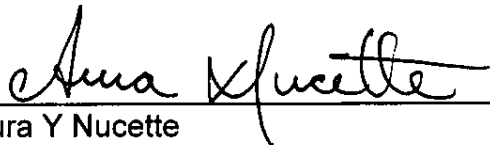
as its Registered Agent to accept service of process within the State.

ACKNOWLEDGMENT:

Having been named to accept service of progress for the above-stated corporation, at place designated in this Certificate, I hereby accept to act in this capacity, and agree to comply with the provision of said Act relative to keeping open said office.


Aura Y. Nucette

WITNESS WHEREOF, the undersigned Incorporators have hereunto set their hands and affixed their seals on this 18 day of October, 2010.


Aura Y Nucette

STATE OF FLORIDA)

COUNTY OF DADE)

BEFORE ME, the undersigned authority, duly authorized to administer oaths and take acknowledgments, personally appeared:

Aura Y Nucette

who has produced _____, as identification and/or is personally known to me who after first being duly sworn, executed the foregoing Certificate of Incorporation, freely and voluntarily for the purpose therein expressed.

IN WITNESS WHEREOF, I have hereunto set my hand and official seal at Miami, Dade County, Florida, this 18 day of October, 2010.


NOTARY PUBLIC, STATE OF FLORIDA

MY COMMISSION EXPIRES:

NOTARY PUBLIC-STATE OF FLORIDA
Raul F. Pino
Commission #DD718392
Expires: JAN. 08, 2012
BONDED THRU ATLANTIC BONDING CO., INC.

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10 OCT 20 AM 8:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA