

P110000017535

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

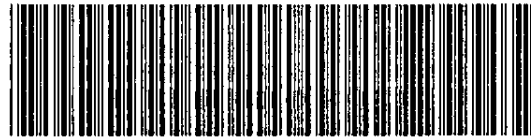
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

11 FEB 17 PM 1:49

APPROVED  
AND  
FILED

## COVER LETTER

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

**SUBJECT:** Teresa's Tiny Tot Child Care 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 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: Teresa Williams  
Name (Printed or typed)

732 Palm Bay Dr  
Address

Tampa, FL 33619  
City, State & Zip

813-401-4454  
Daytime Telephone number

teresastinychildcare@gmail.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)

APPROVED  
AND  
FILED

**ARTICLE I NAME** Teresa's Tiny Tot Child Care Inc  
The name of the corporation shall be:

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**ARTICLE II PRINCIPAL OFFICE**  
Principal street address  
732 Palm Bay Dr  
Tampa, FL 33619

Mailing address, if different is:  
732 Palm Bay **SECRETARY OF STATE**  
TALLAHASSEE, FLORIDA  
Tampa, FL 33619

**ARTICLE III PURPOSE**  
The purpose for which the corporation is organized is:  

Child Day Care

**ARTICLE IV SHARES**  
The number of shares of stock is: 2

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

Name and Title: <u>Teresa Williams</u> <u>CEO</u>	Name and Title: _____
Address: <u>732 Palm Bay Dr</u>	Address: _____
<u>Tampa, FL 33619</u>	_____
_____	_____
Name and Title: _____	Name and Title: _____
Address: _____	Address: _____
_____	_____
_____	_____
Name and Title: _____	Name and Title: _____
Address: _____	Address: _____
_____	_____
_____	_____

**ARTICLE VI REGISTERED AGENT**

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

Name: Teresa Williams  
Address: 732 Palm Bay Dr  
Tampa, FL 33619

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Teresa Williams  
Address: 732 Palm Bay Dr  
Tampa, FL 33619

*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*

  
Required Signature/Registered Agent

2/12/11  
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.*

  
Required Signature/Incorporator

2/12/11  
Date