P11000096225

(Re	equestor's Name)			
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP	WAIT	MAIL		
(Business Entity Name)				
(Do	cument Number)			
Certified Copies	_ Certificates of	Status		
Special Instructions to Filing Officer:				
Office Use Only				

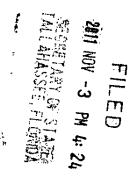


000213032920

Effective Date Jan. 01, 2011

10/24/11--01031--010 **78.75

J15/1651



E Burch HOV 4 2011

COVER LETTER

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

SUBJECT: LEARNING WITH (PROPOSED CORPORA)	LITTLE TONY, INC.			
(PROPOSED CORPORA	TE NAME – <u>MUST INCLUDE SUFFIX</u>)			
Enclosed are an original and one (1) copy of the artic	cles of incorporation and a check for:			
\$70.00 Filing Fee & Certificate of Status	\$78.75 \$87.50 Filing Fee Filing Fee, & Certified Copy Certificate Of Status ADDITIONAL COPY REQUIRED			
FROM: CARMEN FIGUEROA Name (Printed or typed)				
8401 SOUTH	SINE BLVD, # 1424			
JACKSONVILLE, FL. 32256 City, State & Zip				
912, 202, 8022 Daytime Telephone number				
E-mail address: (to be used	D yolvo Com I for future annual report notification)			

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



FLORIDA DEPARTMENT OF STATE Division of Corporations

RECEIVED
11 NOV -3 AH 10: 29
3141510H OF CORPORATIONS

October 25, 2011

CARMEN FIGUEROA 8401 SOUTHSIDE BLVD #1424 JACKSONVILLE, FL 32256

SUBJECT: LEARNING WITH LITTLE TONY, INC.

Ref. Number: W11000054651

We have received your document for LEARNING WITH LITTLE TONY, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

You have indicated in your document the ownership and percentages of the authorized shares. Please note this information is not required nor is it maintained by the Department of State. While we cannot require such, it is recommended that it be removed from the document. The only information needed for this filing is the number of authorized shares.

The document must contain a registered agent with a Florida street address and a <u>signed</u> statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

If your business entity does not intend to transact business until January 1st of the upcoming calendar year, you may wish to revise your document to include an effective date of January 1st. If you do not list an effective date of January 1st, your business entity will become effective this calendar year and it will be required to file an annual report and pay the required annual report fee for the upcoming calendar year this coming January, which is merely weeks away. By listing an effective date of January 1st, the entity's existence will not begin until January 1st of the upcoming year and will, therefore, postpone the entity's requirement to file an annual report and pay the required annual report filing fee until the following calendar year.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6928.

Letter Number: 211A00024383

Tim Burch Regulatory Specialist II New Filing Section

ARTICLES OF INCORPORATIONIn compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

The name of the corpo	AME pration shall be: LEARNING	WITH LITTLE TO	ny, ne.
ARTICLE II P.	RINCIPAL OFFICE Sprincipal street address SOUTHSIDE BUILDING		
	JACKSONVILLE, FL. 322		
The purpose for which	h the corporation is organized is: ATE, PRINT, PUBLISH A	NO SELL A SE	ries of
	WAL CHILDREN'S BO		
	Effec	etive Date Jan. 01,	
ARTICLE IV S. The number of shares	HARES of stock is: 1,000	Jan. Oi,	ا نب المحتودة
Name and Title Address:	TITIAL OFFICERS AND/OR DIRECTOR. CARMEN FIGUEROA PRESIDENT SHOT SOUTHSIDE BLVD JACKSONVILLE, FL. 31	Address:	
Name and Title Address:	BILLIE J. ALDRIDGE 3489 TREVIND CIRCL TITUSVILLE, FL. 3278	- Address:	
Name and Title Address:			
	EGISTERED AGENT a street address (P.O.Box NOT acceptable) of CARMEN FIGUEROA SUMHSIDE BUYS JACKSONVILLE FL. 3		
	SHOLL SOUTHSIDE BLI JACKSONVILLE FL, 33	-0A	
	ns registered agent to accept service of process upiliar with and accept the appointment as regi		
Come	Required Signature/Registered Agent		10.20.11
	Required Signature/Registered Agent nt and affirm that the facts stated herein are		Date formation submitted in a
	rtment of State constitutes a third degree felony		
wine	Required Signature/Incorporator		10 - 20 - 11 Date
auticle 7	III Equative Date:		
e, u			• • •