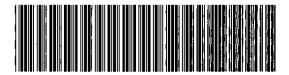
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DIVISION OF CORPORATION

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COVER LETTER

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

SUBJECT: Kidz Land 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 & Certificate of Status	\$78.75 Filing Fee & Certified Copy & Certificate of Status		
	ADDITIONAL COPY REQUIRED		
FROM: Kimberly Banks Name (Printed or typed)			
995 NW Denton Blvd B3			
Address Fort Walton Beach, Florida 32547 City, State & Zip			
850-428-0585 Daytime To	elephone number		
cb3inc@yahoo.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) FILED SECRETARY OF STAFE DIVISION OF CORPORATIONS NAME ARTICLE I Kidz Land Inc. 11 NOV -9 AM 10: 58 The name of the corporation shall be: PRINCIPAL OFFICE ARTICLE II Mailing address, if different is: Principal street address 995 NW Denton Blvd B3 Fort Walton Beach Florida 32547 ARTICLE III PURPOSE The purpose for which the corporation is organized is: Any legal and lawful business ARTICLE IV SHARES The number of shares of stock is:100 INITIAL OFFICERS AND/OR DIRECTORS Name and Title: Kimberly Banks-President Name and Title: 995 NW Denton Blvd B3 Address: __ Address: Fort Walton Beach, Florida 32547 _____ Name and Title: Name and Title: Address: Address: Name and Title: Name and Title: Address: Address: REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: Name: Kimberly Banks 995 NW Dennton Blvd B3 Address: Fort Walton Beach, Florida 32547 ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Name: Kimberly Banks Address: 995 NW Denton Blvd B3 Fort Walton Beach, Florida 32547 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 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.