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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

K 01/13/12

## COVER LETTER

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

SUBJECT: bobillo, 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: Franchy J. Sveti  
Name (Printed or typed)

6685 NW 39 Street  
Address

Virginia Gardens, FL 33166  
City, State & Zip

786-357-4265  
Daytime Telephone number

franchysveti@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)

**ARTICLE I NAME**

The name of the corporation shall be: babillo, Inc.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address  
3941 NW 58 Place  
Virginia Gardens,  
FL 33166

Mailing address, if different is:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: childcare service.

**ARTICLE IV SHARES**

The number of shares of stock is: 100

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

Name and Title: Franchy Svethi (P & CEO)  
Address: 6685 NW 39 Street  
Virginia Gardens, FL  
33166

Name and Title: Maria J. Prada (VP & COO)  
Address: 3941 NW 58 Place  
Virginia Gardens,  
FL 33166

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

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

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

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: Franchy J. Svethi  
Address: 6685 NW 39 Street  
Virginia Gardens, FL 33166

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Maria J. Prada  
Address: 3941 NW 58 Place  
Virginia Gardens, FL 33166

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

\_\_\_\_\_  
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

\_\_\_\_\_  
Date

FILED  
12 JAN 12 PM 4:18  
TALLAHASSEE, FL  
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1/7/12

1/7/12