

P12000011416

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

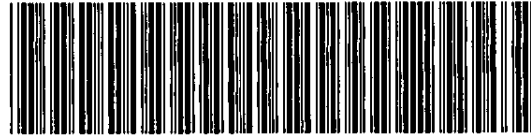
(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only

691-  
W12000004125



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01/20/12--01055--006 \*\*78.75

FILED  
12 FEB - 1 PM 2:50  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

for 2/2/12

## COVER LETTER

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

SUBJECT: Play 2 Learn Child Development Center 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: Antoinette Newton

Name (Printed or typed)

2041 Stryker St

Address

Orlando FL 32805

City, State & Zip

407-435-8796

Daytime Telephone number

play2learn1@gmail.com

E-mail address: (to be used for future annual report notification)

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

12 FEB - 1 PM 2: 50

FILED

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

January 23, 2012

ANTOINETTE NEWTON  
2041 STRYKER STREET  
ORLANDO, FL 32805

SUBJECT: PLAY 2 LEARN CHILD DEVELOPMENT CENTER INC.  
Ref. Number: W12000004125

We have received your document for PLAY 2 LEARN CHILD DEVELOPMENT CENTER 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):

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

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) 245-6973.

Claretha Golden  
Regulatory Specialist II  
New Filing Section

Letter Number: 712A00001562

FILED  
12 FEB - 1 PM 2:50  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**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:

Play 2 Learn Child Development Center Inc.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

2041 Stryker St

Orlando, FL 32805

Mailing address, if different is:

FILED  
12 FEB -1 PM 2: 50  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Any and all lawful business

**ARTICLE IV SHARES**

The number of shares of stock is:

100

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

Name and Title: Antoinette Newton - Owner

Address: 2041 Stryker St

Orlando, FL 32805

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

Address: \_\_\_\_\_

Name and Title: Gary Newton II- Owner

Address: 2041 Stryker St

Orlando, FL 32805

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: Antoinette Newton

Address: 2041 Stryker St

Orlando, FL 32805

**ARTICLE VII INCORPORATOR**

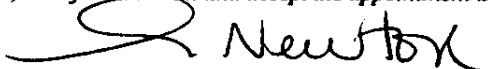
The name and address of the Incorporator is:

Name: Antoinette Newton

Address: 2041 Stryker St

Orlando, FL 32805

*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

Jan. 10, 2012

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

Jan. 10, 2012

Date