## 712000019718

| (Requestor's Name)                      |                   |           |  |
|---|-------------------|-----------|--|
| (Address)                               |                   |           |  |
| (Address)                               |                   |           |  |
| (Cit                                    | y/State/Zip/Phone | #)        |  |
| PICK-UP                                 | ☐ WAIT            | MAIL      |  |
| (Bu                                     | siness Entity Nam | e)        |  |
| (Document Number)                       |                   |           |  |
| (50                                     |                   |           |  |
| Certified Copies                        | _ Certificates    | of Status |  |
| Special Instructions to Filing Officer: |                   |           |  |
|   |                   |           |  |
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7. SULVEUS LEB 58 5015

February 20, 2012

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

Re: M R Child Care Inc #P0900008974

To whom it may concern:

By means of this letter I am advising that I have no intentions of re-instating the above mentioned dissolved corporation.

Should you have any questions or concerns please do not hesitate to contact me at 305-595-24

Sincerely,

Martha Rodriguez

2 FEB 27 AH III: (

## **COVER LETTER**

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

| SUBJECT: mr R child C  | ave Inc<br>RATE NAME - <u>MUST INCLUDE SUFFIX</u> )  |   |
|--|--|---|
| (PROPOSED CORPO  | PRATE NAME – <u>MUST INCLUDE SUFFIX</u> )  |   |
| Enclosed are an original and one (1) copy of the   | articles of incorporation and a check for:   |   |
| \$70.00 \$78.75 Filing Fee & Certificate of Status   | \$78.75 \$87.50 Filing Fee & Certified Copy Certificate of Status ADDITIONAL COPY REQUIRED |   |
|  |  |   |
| All the second of the second o |  |   |
| FROM: Maria E. Ru  | tille (1 filitett of typett)   |   |
| 7750 50  | Address Address  |   |
|  | Address m~~  | • |
|  | FL 33183   |   |
| C  | ity, State & Zip   |   |
| 30s -  | 595-2407   |   |
|  | e Telephone number   |   |
|  | va q Chotmail.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 The name of the cor  | NAME poration shall be: MRCh: 11 Cave Inc.  |  |
|--------------------------------|---|--|
|                                |   |  |
| ARTICLE II                     | PRINCIPAL OFFICE  | Mailing address, if different is:  |
|                                | Principal street address 11828 5. w. 210 Terrace  | Same   |
| _                              | mami fl 33177   | Sine   |
| _                              | 11 men 15 3 2 1 1 1   |  |
| _                              |   |  |
| ARTICLE III I                  |   |  |
|                                | nich the corporation is organized is:   |  |
| Any a.                         | nd all legal purposes   |  |
| Tax I.D.                       | # 26-419-66-26  |  |
| ARTICLE IV The number of share | SHARES es of stock is: 100 e + 1.00   |  |
|                                | INITIAL OFFICERS AND/OR DIRECTORS   |  |
|                                | le: Martha Radriquez Pres Name and Ti   | tle:   |
| Address:                       | ((828 S.W. 218 Terr Address:  |  |
|                                | Miami FC 33177  |  |
|                                |   |  |
| N                              | L. G. J. Ol. H. N. N.   | iat  |
|                                | le: Francisco Blanco, U.P. Name and Ti  |  |
| Address:                       | 11829 5 210 Terr Address:   | <del> </del>   |
|                                | Mirami, FL 33177  |  |
|                                |   | <del></del>  |
|                                | le: Name and Ti   | tle:   |
| Address:                       | Address:  |  |
|                                |   | <del></del>  |
|                                |   |  |
| ARTICLE VI                     | REGISTERED AGENT  | <b>2</b> ≈ <b>a</b> •  |
|                                | ida street address (P.O. Box NOT acceptable) of the registered a  | The second secon |
| Name:                          | Martha Rodrigaez  | SE N   |
| Address:                       | 11828 S.W. 210 Terr   | m ~  |
| Addiess.                       | Minmi (2 3317)  | 11 ≥ 11  |
|                                |   | FS B   |
| ARTICLE VII                    | INCORPORATOR  |  |
| The name and add               | ress of the Incorporator is:  |  |
| Name:                          | Martha Rodriguez  | <b>⋄</b> —   |
| Address:                       | 11828 SW. 210 Terr  |  |
|                                | Marthe Redriguez  11828 Sw. 210 Terr  Miam FL 33177   |  |
| Havina haan nawa               | d as registered agent to accept service of process for the above  | stated corneration at the place designated in  |
|                                | a as registered agent to accept service of process for the above<br>familiar with and accept the appointment as registered agent an |  |
| -سا                            |   | in agree to act in this capacity   |
| (A)                            | and Kapa  | 2-/2-/2  |
|                                | Required Signature/Registered Agent   | 2 - /2 - /2<br>Date  |
|                                |   |  |
|                                | nent and affirm that the facts stated herein are true. I am awa   |  |
| document to the De             | partment of State constitutes a third degree felony as provided fo  | r in s.817.155, F.S.   |
| $\rightarrow$                  | a Q A   |  |
| Ona                            | Required Signature/Incorporator   | 2-12-12<br>Date  |
|                                | Required Signature/Incorporator   | Date   |