## P/3000080960

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(Address)
(Address)
(City/State/Zip/Phone #)
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(Business Entity Name)
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SERETARY OF STATE
PAPEL ARASSEE, FI ORIGI

× 10/02/13

## **COVER LETTER**

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

SUBJECT: minr	nie's house corp		
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an origi	nal and one (1) copy of the art	icles of incorporation and	d a check for:
\$70.00 Filing Fee	□ \$78.75 Filing Fee & Certificate of Status .	\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED
<sub>FROM:</sub> ta	iluma rodriguez		
<del></del>	Name	e (Printed or typed)	<u> </u>
33	81sw 130 ave		
		Address	
mi	ami fl 33175		
	•	State & Zip	
30	58125699		

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

Daytime Telephone number

rodrigueztailuma@yahoo.com

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

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

	NCIPAL OFFICE Principal street address	Mailing address, if different is:	
81sw 130 a	ve		
ami fl 3317	5		
Durpose for which t	he corporation is organized is: day	care home	
-			
			A Constant
	<del></del>		
			and the same of th
			30
TCLE IV SHA	NRES 1		30 ASS
TCLE IV SHA	NRES 1		30 ASS
number of shares of	stock is:   ITAL OFFICERS AND/OR DIRECT		- umi
number of shares of	stock is:	<u>CTORS</u>	30 ASS
number of shares of	stock is:   ITAL OFFICERS AND/OR DIRECT	<u>CTORS</u>	30 AM 10: 49  TARTY OF STATE ASSEE, FLORIDA
TCLE V INT	rial officers and/or directions: 1	CTORS  Name and Title:	30 AM 10: 49 TARY OF STATE ASSEE, FLORIDA
TCLE V INT	rial officers and/or direct tailuma rodriguez 3381 sw 130 ave	CTORS  Name and Title:	30 AM 10: 49  TARTY OF STATE ASSEE, FLORIDA
TCLE V INT Name and Title Address	tailuma rodriguez 3381 sw 130 ave miami fl 33175	Name and Title: Address:	30 AM IO: 49  TARY OF STATE ASSEE, FLORIDA
Name and Title Name and Title	tailuma rodriguez 3381 sw 130 ave miami fl 33175	Name and Title:  Address:  Name and Title:	30 AM IO: 49  TARY OF STATE ASSEE, FLORIDA
TCLE V INT Name and Title Address	tailuma rodriguez 3381 sw 130 ave miami fl 33175	Name and Title:  Address:  Name and Title:	30 AM IO: 49  TARY OF STATE ASSEE, FLORIDA
Name and Title Name and Title	tailuma rodriguez 3381 sw 130 ave miami fl 33175	Name and Title: Address:  Name and Title: Address:	30 AM IO: 49  IARLY OF STATE ASSEE, FLORIDA
Name and Title Name and Title	tailuma rodriguez 3381 sw 130 ave miami fl 33175	Name and Title: Address:  Name and Title: Address:	30 AM IO: 49  IARLY OF STATE ASSEE, FLORIDA
Name and Title  Name and Title  Address	tailuma rodriguez 3381 sw 130 ave miami fl 33175	Name and Title: Address: Name and Title: Address:	30 AM IO: 49  JAMY OF STATE ASSEE, FLORIDA
Name and Title  Name and Title  Address	tailuma rodriguez 3381 sw 130 ave miami fl 33175	Name and Title:  Address:  Name and Title:  Address:  Name and Title:  Name and Title:	30 AM IO: 49  JAMY OF STATE ASSEE, FLORIDA

Name an	d Title:	Name and Title:	_
Address		Address:	- -
ARTICLE VI The name and F	REGISTERED AGENT  lorida street address (P.O. Box NOT acceptable) of	of the registered agent is:	
Name:	tailuma rodriguez		
Address:	3381sw 13 <u>0</u> ave	AELL	<del>anderga,</del>
	miami fl 33175	ARE S	ANNOUGH ALERA
ARTICLE VII	INCORPORATOR	O AMIO: 49 SEE, FLORID SEE, FLORID	Tr.
The name and ac	Idress of the Incorporator is:		A THE THE PARTY OF
Name:	tailuma rodriguez		
Address:	3381sw 130 ave	_	
	miami fl 33175	_	
Having been nan this certificate, I	ned as registered agent to accept service of proces am familian with and accept the appointment as re		l in
		09/24/2013	_
	Required Signature/Registered Agent	Date	
I submit this doc document to the	ument and affirm that the facts stated herein are Department of State constitutes a third deprey felo	e true. I am aware that the false information submitted in ny as provided for in s.817.155, F.S.	n a
\ () <b>X</b> /		09/24/2013	
	Required Signature/Incomp (ato)	Date	<del></del>