## Q13000081346

(Requestor's Name)				
(Address)				
(Address)				
(Cit	ty/State/Zip/Phone	e #)		
PICK-UP	MAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates	s of Status		
Special Instructions to Filing Officer:				
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Office Use Only



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OF PIOLENCY OF FILLING

2018 OCT -2 FM ID: 03

13 OCT -3 AH IO: I



## **COVER LETTER**

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

SUBJECT: A Place of Their Own Child Development 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  ADDITIONAL CO	□ \$87.50 Filing Fee, Certified Copy & Certificate o Status PY REQUIRED		
FROM: D	esire White				
	Name	(Printed or typed)			
905 Saddle Creek Run					
	Ţ.	Address			
Tallahassee, Florida 32301					
City, State & Zip					
(850) 345-8190					
	Daytime T	elephone number			
<u>d</u> €	esireewhite83@yaho E-mail address: (to be use		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)

The name of the corpor		-	'
ARTICLE II PR	INCIPAL OFFICE Principal street address	Mailing add	dress, if different is:
905 Saddle C	-		
Tallahassee,	FL 32301	<del> </del>	
	RPOSE the corporation is organized is:  The pu	rpose of this orga	anization shall
be to provide o	hildcare, which will fulfill a chi	ld's social,psycholo	gical, cognitive, and
physical needs, av	vay from their homes, where substan	tially all the care provide	ed is to enable individuals
(the parents or leg	al guardians) to be gainfully employed	d. The services are availa	able to the general public.
Operating on the pr	inciple of equal opportunity in enrollme	nt for children without reg	ard to race, sex, ethnicity,
religion or soci	o- economic background, and	sexual orientation F	Providing high quality
	child care, including a full day pr	<del></del>	
ac volopii ciitai i	sinia care, including a full day pi	ogram for children in	namo unu sixui grade.
	ARES 1600		
ARTICLE IV SH The number of shares of ARTICLE V IN	ARES f stock is: 100 / 100	<u> </u>	
ARTICLE IV SH The number of shares of	ARES 100 100 100 100 100 100 100 100 100 10	RS Name and Title:	
ARTICLE IV SH The number of shares of ARTICLE V IN	ARES f stock is: 100 / 1	_	5.02 W
ARTICLE IV SH The number of shares of ARTICLE V IN Name and Tit	ARES 100 100 100 100 100 100 100 100 100 10	Name and Title:	13 OC
ARTICLE IV SH The number of shares of ARTICLE V IN Name and Tit	ARES f stock is: 100 / 1	Name and Title:	13 OCT -3
ARTICLE IV SH The number of shares of ARTICLE V IN Name and Tit Address	TIAL OFFICERS AND/OR DIRECTOR  10: Desiree White-CEO  905 Saddle Creek Run  Tallahassee, FL 32301	Name and Title: Address:	F8 00 -3 25
ARTICLE IV SH The number of shares of ARTICLE V IN Name and Tit Address	ARES f stock is: 100 / 1	Name and Title: Address:	F8 00 -3 25
ARTICLE IV SH The number of shares of ARTICLE V IN Name and Tit Address	TIAL OFFICERS AND/OR DIRECTOR  10: Desiree White-CEO  905 Saddle Creek Run  Tallahassee, FL 32301	Name and Title: Address:  Name and Title:	F8 00 -3 25
ARTICLE IV SH The number of shares of ARTICLE V IN Name and Tit Address	TIAL OFFICERS AND/OR DIRECTOR  905 Saddle Creek Run  Tallahassee, FL 32301	Name and Title: Address:  Name and Title:	E
ARTICLE IV SH The number of shares of ARTICLE V IN Name and Tit Address	TIAL OFFICERS AND/OR DIRECTOR  905 Saddle Creek Run  Tallahassee, FL 32301	Name and Title:Address:Name and Title:Address:	E
ARTICLE IV SH The number of shares of ARTICLE V IN Name and Tit Address	TIAL OFFICERS AND/OR DIRECTOR  Besiree White-CEO  905 Saddle Creek Run  Tallahassee, FL 32301	Name and Title: Address:  Name and Title: Address:	001 -3 AH 0: 18
ARTICLE IV SH The number of shares of ARTICLE V IN Name and Tit Address	TIAL OFFICERS AND/OR DIRECTOR  Be: Desiree White-CEO  905 Saddle Creek Run  Tallahassee, FL 32301	Name and Title:  Address:  Name and Title:  Address:  Name and Title:	001 -3 AH 0: 18

Name and	Title:	Name and Title:
Address		Address:
		·
ARTICLE VI	REGISTERED AGENT	
The name and Flo	orida street address (P.O. Box NOT acceptable) of	the registered agent is:
Name:	Desiree White	
Address:	905 Saddle Creek Run	
	Tallahassee, FL 3201	
ARTICLE VII	INCORPORATOR	
The name and ad	<u>dress</u> of the Incorporator is:	
Name:	Desiree White	
Address:	905 Saddle Creek Run	
	Tallahassee, FL 32301	
	,	•
Having been nam	ied as registered agent to accept service of process im familiar yhith and/accept the appointment as reg	for the above stated corporation at the place designated in istered agent and agree to act in this capacity
		(2/2/12
	Required Signature/Registered Agent	1(1/3/13 Date
		true. I am aware that the false information submitted in a
document to hal	Department of State constitutes a third degree felon	y as provided for in s.817.155, F.S.
	Required Signature/Incorporator	10/3/13
	- Required Signature-micorporator	Date Date
	~	

13 OCT -3 AN ID: 18