

P14000013015

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

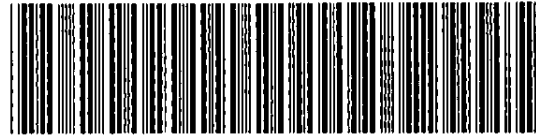
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



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02/12/14--01002--013 \*\*70.00

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OFFICE OF THE  
CLERK OF THE  
SUPREME COURT  
2014 FEB 12 AM 10:13

APPROVED  
AND  
FILED  
2014 FEB 12 AM 10:24  
CLERK OF THE  
SUPREME COURT  
FLORIDA

*[Handwritten signature]*  
2-12-14

## COVER LETTER

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

SUBJECT: Jolly Jo's Child Care 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: Joanne Dyer  
Name (Printed or typed)  
1702 Gibbs Drive  
Address  
Tallahassee, FL 32303  
City, State & Zip  
850-221-2002  
Daytime Telephone number  
JollyJos@aol.com  
E-mail address: (to be used for future annual report notification)

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

1/12/14

20. Dept of State

I Joanne Dyer, have  
no intention of reinstating  
Jolly Jo's Child Care Center  
document ~~of~~ Doc # P12000019023  
I release the name.

J Dyer

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: Jolly Jo's Child Care Center Inc

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

1702 Gibbs Drive  
TALL, FL 32303

Mailing address, if different is:

1702 Gibbs Drive  
TALL, FL 32303

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: \_\_\_\_\_

lawful businesses

any and all

**ARTICLE IV SHARES**

The number of shares of stock is: 10

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

Name and Title: Joanne Dyer

Address

P.O. Box 37141  
TALL, FL 32315

Name and Title: Pres, V.P. Treasurer

Address:

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

Address

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

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

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

Address

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

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

FILED  
STATE  
FLORIDA

14 FEB 12 AM 10:24

APPROVED  
AND  
FILED

(cont.)

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

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name:

Joanne Dyer

Address:

1702 Gibbs Drive  
Tallahassee, FL

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

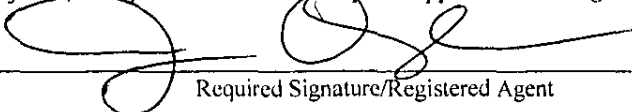
Name:

Jolly Jo's Child Care Center, Inc

Address:

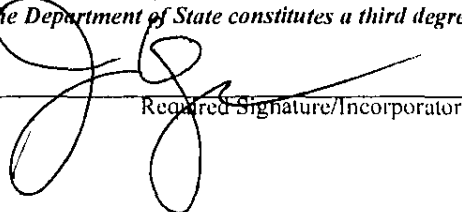
1702 Gibbs Drive  
Tallahassee FL

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

1/12/14  
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

1/12/14  
Date