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SECRETARY OF STATE
DIVISION OF CORPORATE AFFAIRS
2014 MAR 31 PM 1:03

144

COVER LETTER

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

SUBJECT: **KING'S KIDS ACADEMY OF LEARNING, 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 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

<input checked="" type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED	

FROM: **Donnie Clark**
Name (Printed or typed)

912 N 21st Street
Address

Fort Pierce, FL 34950
City, State & Zip

561-662-7235
Daytime Telephone number

donnieclark714@aol.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)

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ARTICLE I NAME

The name of the corporation shall be:

KING'S KIDS ACADEMY OF LEARNING, INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address

1907 Okeechobee Road

Fort Pierce, FL 34950

Mailing address, if different is:

P.O. Box 2142

Fort Pierce, FL 34954

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Children day care center

ARTICLE IV SHARES

The number of shares of stock is:

1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: **Lany Valsaint, P/D**

Name and Title: _____

Address **4708 Palmetto Drive**

Address: _____

Fort Pierce, FL 34982

Name and Title: **Zakari Valsaint, T/D**

Name and Title: _____

Address **4708 Palmetto Drive**

Address: _____

Fort Pierce, FL 34982

Name and Title: **Lanaise Valsaint, S/D**

Name and Title: _____

Address **4708 Palmetto Drive**

Address: _____

Fort Pierce, FL 34982

(conti.)

SECRETARY OF STATE
DIVISION OF CORPORATIONS

2014 MAR 31 PM 1:03

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: Lany Valsaint
Address: 4708 Palmetto Drive
Fort Pierce, FL 34982

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Donnie Clark
Address: 912 N 21st Street
Fort Pierce, FL 34950

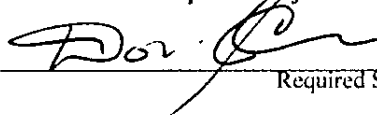
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity


Required Signature/Registered Agent

03/26/2014

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

03/26/2014

Date