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ARTICLES OF INCORPORATION OF COLORIN PRESCHOOL, INC.

The undersigned incorporator, for the purpose of forming a Profit Corporation under Chapter 607 of the Florida Statutes, hereby adopts the following Article of Incorporation.

ARTICLE I

The name of this corporation shall be:

COLORIN PRESCHOOL, INC.

ARTICLE II

This corporation shall commence existence upon the date of filing with the Division of Corporations, state of Florida, and shall have perpetual existence.

ARTICLE III

The principal place of business of this corporation is:

405 HIALEAH DRIVE, HIALEAH, FL 33010

ARTICLE IV

The general nature of business of this corporation is to transact any and all lawful business.

ARTICLE V

The aggregate number of shares which this corporation shall have authority to issue is 1,000 shares having an individual par value of \$1.00.

Unless otherwise stated in these articles, or in an amendment to these articles, there shall be only one class (1) class of stock of this corporation.

ARTICLE VI

The name and street address of the initial Registered Agent of the corporation shall be:

GISELLE CHAMIZO
1208 SALZEDO STREET, APT 21
CORAL GABLES, FL 33134

ARTICLE VII

The name and address of the officers and initial board of director(s) shall be:

1. <u>GISELLE CHAMIZO</u> PRESIDENT, DIRECTOR 1208 SALZEDO STREET, APT 21 CORAL GABLES, FL 33134

ARTICLE VIII

The name and address of the incorporator executing these Articles of Incorporation is:

GISELLE CHAMIZO
1208 SALZEDO STREET, APT 21
CORAL GABLES, FL 33134

The undersigned has executed these Articles of Incorporation this 4th day of February 2015.

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

COLORIN DAYCARE, INC. (Name of Corporation)

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THE ARTICLES OF INCORPORATION, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM PAMILIAR WITH AND ACCEPT THE OBJAGATIONS OF MY POSITION AS REGISTERED AGENT.

Signature:

Registered Agent:

ADDRESS:

CITY OF:

HIALEAH

COUNTY OF:

MIAMI-DADE

STATE OF:

FLORIDA