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(Re	questor's Name)	
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(Cit	:y/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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TO ACKNOWLEDGE

15 JUL 27 AM II: 02

SECRETARY OF STATE
PIVISION OF CORPORATION

15 JUL 27 AM 10: 30

JUL 28 2015 T SCHROEDER



1000 Ponce de Leon Blvd. Suite: 105 Coral Gables, FL 33134 Phone: 305-444-4994

Email: filing@ecfsfiling.com

Office Use Only				

Other:

CORPORATION NAME(S) & DOCUMENT NUMBERS(S):

		, ,		• •
1. Tiny	/	Preschool		/
(CORPORATÉ N.	AME)		(DOCUMEN	NT #)
2.				
(CORPORATE N	AME)		(DOCUMEN	NT #)
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3. (CORPORATE N	AME)		(DOCUMEN	NT #)
☐ Walk-In	Pick up time:	M Certified (Copy ∃Cer	tificate Of Status
Eggillawaki	\$ 3 % A	mendments		Other Fillings
Profit	Ame	endments	<u> </u>	Annual Report
Non-Profit	Res	ignation	-	Fictitious Name
Limited Liability	Diss	olution/Withdrawal		Apostille:

Other:

Examiners	Initials	

Other:

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

ARTICLE I NAMI The name of the corpor	TINY STEPS PRESCHOO	DL III CORP	
ARTICLE II PRIN 14520 SW 8TH ST MIAMI, FL 33184			lress, if different is:
ADTICLE III DAND	POSE the corporation is organized is:	ND ALL LAWFUL BUSINESS	
			3 V S
ARTICLE V INITI	f stock is: AL OFFICERS AND/OR DIRECTORS ROSA NUNEZ (P)	 Name and Title:	FILED SECRETARY OF STAVISION OF CORPORA
Address	14520 SW 8TH ST	Address:	30 OF
Name and Title	e:	Address:	
Name and Title Address	e:		

iname a	and little	Name and Title:	
Addre	ss	Address:	
			
ARTICLE VI	REGISTERED AGENT Florida street address (P.O. Box NOT acce	ntable) of the registered agent is:	
Name:	ROSA NUNEZ	publicy of the registered agent is.	
Address:	14520 SW 8TH ST		
	MIAMI, FL 33184		<u> </u>
ARTICLE VII	INCORPOR4TOR		SECRETA ASION O
The <u>name and</u>	address of the Incorporator is:		FILE TARY OF CO
Name:	ROSA NUNEZ		AM II
Address:	14520 SW 8TH ST		EU OF STAIL DRPORATIO AM 10: 30
	MIAMI, FL 33184		LEU Y OF STATE CORPORATIONS AM 10: 30
Effective date, i	EFFECTIVE DATE: If other than the date of filing: date is listed, the date must be specific an	. (OPTIONAL	_) ess davs prior or 90 business
days after the the Mote: If the dath the document's	filing.) te inserted in this block does not meet the ap effective date on the Department of State's i	plicable statutory filing requiremen records.	ts, this date will not be listed as
Having b	een named as registered agent to accept servi icate. I am familiar with and accept the appoin	ee of process for the above stated con struent as registered agent and agree t	poration at the place designated in to act in this capacity
Q) letters		07/23/2015
	Required Signature/Registere	d Agent	Date
I şubnüt i documen	this document and affirm that the facts states it to the Department of State constitutes a third	l herein are true. I am aware that the degree felony as provided for in s.81:	ne false information submitted in a T.155, F.S.
	o Keakeur		07/23/2015
	Required Signature Incorporator		Date