

07/27/2003

13:44

0855201439

LAZARUS

PAGE 1/03

P16000062175

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H16000180554 3)))



H160001805543ABC/

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.
Account Number : I20000000019
Phone : (305)552-5973
Fax Number : (305)675-5944

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

RECEIVED

16 JUL 27 PM 3:17

TALLAHASSEE FLORIDA

SECRETARY OF STATE
TALLAHASSEE FLORIDA

16 JUL 27 AM 9:06

FILED

**FLORIDA PROFIT/NON PROFIT CORPORATION
LOVELY KIDS DAY CARE INC**

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

Electronic Filing Menu

Corporate Filing Menu

Help

11/11

ARTICLES OF INCORPORATION 16000180554
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME: The name of the corporation is:

LOVELY KIDS DAY CARE INC

ARTICLE II PRINCIPAL OFFICE:

The principal street address and mailing address is:

500 W 45 PL.
HALEAH FL 33012.

ARTICLE III SHARES: The number of shares of stock is: 100

ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:

YANELIS PADRON ROQUE.

ABEL SILVA (VP)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

16 JUL 27 AM 9:06

FILED

ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:

The name and Florida street address (PO Box not acceptable) of the registered agent is:

Yanelis Padron Roque
500 W 45 PL
Hialeah FL 33012

ARTICLE VI INCORPORATOR: The name and address of the Incorporator is:

Abel Silva
500 W 45 PL
Hialeah FL 33012

16000180554

FILED
16 JUL 27 AM 9:05 16000180554
SECRETARY OF STATE
TALLAHASSEE FLORIDA

Required Signatures:

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

Yanelis Pacheco 07/27/16
Registered Agent 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.

Abe Silva 07/27/16
Incorporator Date

H16000180554