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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

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

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.
Account Number : I20000000019
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Email Address: _____

2021 JUN -7 PM 5:06

**FLORIDA LIMITED LIABILITY CO.
LITTLE GIANTS KID'S SERVICES, CORP**

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

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ARTICLES OF INCORPORATION

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

ARTICLE I NAME: The name of the corporation is:Little Giants Kid's Services, corp**ARTICLE II PRINCIPAL OFFICE:**

The principal street address and mailing address is:

19191 Ponce De Leon, Coral
Gables FL 33134**ARTICLE III SHARES:** The number of shares of stock is: 100**ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:**Madelin Montano (P)

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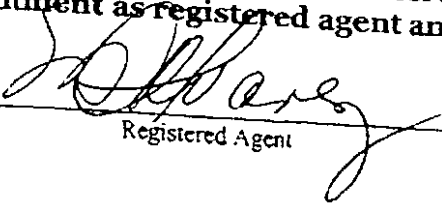
ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:

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

Madelin Montano
19191 Ponce De Leon Coral
Gables FL 33134**ARTICLE VI INCORPORATOR:** The name and address of the Incorporator is:Madelin Montano
19191 Ponce De Leon Coral
Gables FL 33134

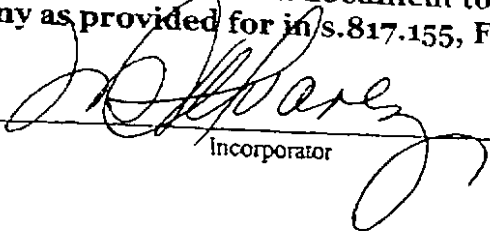
Required Signatures:

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



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.



Incorporator _____ Date _____

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