

P21000066431

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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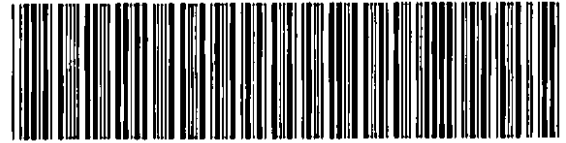
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE, FL

9/21 JUL 20 AM 9:43
SECRETARY OF STATE
TALLAHASSEE, FL

2011.6.11

12/12

Incorporating Services, Ltd.

1540 Glenway Drive
Tallahassee, FL 32301
850.656.7956
Fax: 850.656.7953
www.incserv.com
e-mail: accounting@incserv.com



ORDER FORM

TO Florida Department of State
The Centre of Tallahassee
2415 North Monroe Street, Suite 810
Tallahassee, FL 32303
corphelp@dos.myflorida.com
850-245-6051

FROM Melissa Moreau
mmoreau@incserv.com
850.656.7953

REQUEST DATE 7/20/2021

PRIORITY Regular Approval

OUR REF.# (Order ID#) 936882

ORDER ENTITY

LITTLE WONDERS CHILDCARD CENTRE INC

PLEASE PERFORM THE FOLLOWING SERVICES:

LITTLE WONDERS CHILDCARD CENTRE INC (FL)

New corp filing

NOTES:

\$70.00 Authorized

Email address for annual report reminders: radiv@incserv.com

RETURN/FORWARDING INSTRUCTIONS:

ACCOUNT NUMBER: I20050000052

Please bill the above referenced account for this order.

If you have any questions please contact me at 656-7956,

Sincerely,

A handwritten signature in black ink, appearing to be "MS" or similar initials, written over a horizontal line.

Please bill us for your services and be sure to include our reference number on the invoice and courier package if applicable. For UCC orders, please include the thru date on the results.

ARTICLES OF INCORPORATION

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

FILED
2021 JUL 20 AM 9:43

ARTICLE I NAME

The name of the corporation shall be: LITTLE WONDERS CHILDCARE CENTRE INC

ARTICLE II PRINCIPAL OFFICE

Principal **street** address
11 NORTH MELBOURNE ST
BEVERLY HILLS, FL 34465

SECRETARY OF STATE
TALLAHASSEE, FL
Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: EARLY EDUCATION AND CHILDCARD FOR INFANTS
AND TODDLERS TO SCHOOL AGE CHILDREN

ARTICLE IV SHARES

The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: KIRSTIE POOL, PRESIDENT & DIRECTOR Name and Title: CLAYTON JAMES POOL, DIRECTOR & SECRETARY

Address: 2166 ORCHARD DR
ABBOTSFORD, BC V3G 2B7
CANADA

Address: 2166 ORCHARD DR
ABBOTSFORD, BC V3G 2B7
CANADA

Name and Title: _____

Name and Title: _____

Address: _____

Address: _____

Name and Title: _____

Name and Title: _____

Address: _____

Address: _____

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: INCORPORATING SERVICES, LTD.
Address: 1540 Glenway Drive
Tallahassee, FL 32301

FILED
2021 JUL 20 AM 9:48
SECRETARY OF STATE
TALLAHASSEE, FL

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: JIAYU ZHANG
Address: 19 W 34TH ST STE 1018
NEW YORK, NY 10001

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

Melissa A. Moreau
Required Signature/Registered Agent

7/20/2021
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.

[Signature]
Required Signature/Incorporator

7/20/21
Date