## P9000001055 TRANSMITTAL LETTER

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

900001576709 -01/03/36--01057--013, \*\*\*\*\*78.75 \*\*\*\*\*78.75

for:	\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate	\$122.50 Filing Fee & Certified Copy Additional Copy	\$131.25 Filing Fee, Certified Copy & Certificate y Required	- WY 95
	FROM:	Tom	Teufec		2 1311
		9545	SUWS MINE	Buo	EHH: 19

New P. Richey, Fl. 34654 City, State & Zip

NOTE: Please provide the original and one copy of the articles.

813) 869-6444 Daytime Telephone number

of 1/8/100

## ARTICLES OF INCORPORATION

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The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

THE RAINBOW TREE SCHOOL, INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

7736 GAND. BLUD. Pr. Richey, Fl. 34668

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS
The name and address of the initial registered agent is:

TOM TEUFEL 9545 SUNSHINE BLUD. Now Pt. Richey, Fl. 34654

## ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

Tom Teufer 9545 Susman Brua. New Pr Francy, Fr. 34454

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

Signature

Signature

Signature

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

SECRETAIN OF STATIONS
INTERPORT TO STATE OF STAT

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PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name	of the corporation is:	TATE	Privisou	REE	Semon	المر

2. The name and address of the registered agent and office is:

Tom Tow	٠ ١
(NAM	E)
9545 Simsh	NE BLUP.
(P.O. Box or Mail Drop B	X NOT ACCEPTABLE)
NEW Pr. Rc	teg, FZ, 34634
. (Ciry/Sta	TE/ZIV) '

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, 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 familiar with and accept the obligations of my position as registered agent.

(SIGNATURE) (DATE)