

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

SUBJECT: LEARNI	NG WHEEL, IN	c		
		namo - must Includo su	ffix)	
			500 -01/ ***	DDD1 561259 /08/9601023019 **122.50 ****122.50
Enclosed is an original	and one (1) co	py of the articles o	f incorporation a	and a check
for : \$70.00 Filing Fee	\$78.75 Filing Fee & Certificate	区对 \$122.50 Filing Fee & Certified Copy Additional Copy	\$131.25 Filing Fee, Certified Copy & Certificate y Required	
FROM:				
	2850 SE 36th Street Address OCALA, FL 34471 City, State & Zip			
				1-10-96
	(904) 624-0516			
	Daytime	Telephone number		\mathcal{A}

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

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be:

LEARNING WHEEL, INC.

/ RTICLE II PRINCIPAL OFFICE

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

Principal Place of Business to be determined.

Mailing Address is: 2850 SE 36th Street Ocala, FL 34471

ARTICLE III SHARES

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

100 shares

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Albert R Harrelson 2850 SE 36th Street Ocala, FL 34471

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):

Albert R Harrelson 2850 SE 36th Street Ocala, FL 34471

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this					
3rd	day of _	January	, 19 <u>96</u>		
		100	Signature		
		· · · · · · · · · · · · · · · · · · ·	Signature		
		<u></u> .	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

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:	Learning Wheel, Inc.	<u> </u>
1.	And hand of the experiments		
			25 TO 1 100
2.	The name and address of the regis	tered agent and office is:	SSEE THE SE
	Albert	R Harrelson	유를 등
		(NAME)	REAL
	2850 Si (P.O. Bo	E 36th Street x or Mail Drop Box NOT ACCEPTABLE)	
	Ocala,	FL 34471 (CITY/STATE/ZIP)	

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)

January 3, 1996
(DATE)