

P96000012015

TRANSMITTAL LETTER

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

FILED  
FEB - 5 AM 7:46  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

SUBJECT: CIRCLE OF FRIENDS CHILD CARE, INC.  
(Proposed corporate name - must include suffix)

000001706500  
-02/05/96--01078--009  
\*\*\*\*122.50 \*\*\*\*122.50

Enclosed is an original and one (1) copy of the articles of incorporation and a check  
for :

☐ \$70.00  
Filing Fee

☐ \$78.75  
Filing Fee  
& Certificate

☒ \$122.50  
Filing Fee  
& Certified Copy

☐ \$131.25  
Filing Fee,  
Certified Copy  
& Certificate

FROM: CAROLYN PEPPLER  
Name (printed or typed)

4102 S.E. 8TH AVENUE  
Address

CAPE CORAL, FL 33904  
City, State & Zip

(941) 542-3160  
Daytime Telephone number

2/8/96  
TR

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

## ARTICLES OF INCORPORATION

FILED  
96 FEB - 5 AM 11:16  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*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: CIRCLE OF FRIENDS CHILD CARE, INC.

### ARTICLE II PRINCIPAL OFFICE

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

4102 S.E. 8TH AVENUE  
CAPE CORAL, FL 33904

### ARTICLE III SHARES

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

500 SHARES - COMMON STOCK

### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

CAROLYN PEPPLER  
4102 S.E. 8TH AVENUE  
CAPE CORAL, FL 33904

**ARTICLE V INCORPORATOR(S)**

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

1. CAROLYN PEPPLER  
4102 S.E. 8TH AVENUE  
CAPE CORAL, FL 33904  
(INITIAL DIRECTOR)

2. THE PURPOSE OF THIS CORPORATION IS TO PROVIDE CHILD CARE SERVICES TO THE GENERAL PUBLIC.
3. COMMON STOCK WILL HAVE A PAR VALUE OF \$1.00 PER SHARE.

FILED  
96 FEB - 2 AM 7:46  
TALLAH  
SECRETARY OF STATE  
FLORIDA

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

1ST day of FEBRUARY, 19 96.

Carolyn Pepler  
Signature

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

Articles of Incorporation  
Filing Fee - \$35

# **CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 or 617.0501, 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: CIRCLE OF FRIENDS CHILD CARE, INC.

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

CAROLYN PEPPLER

(Name)

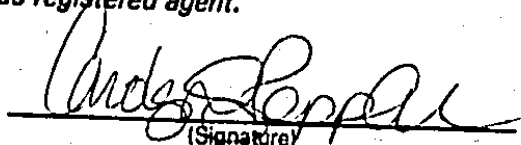
4102 S.E. 8TH AVENUE

(P.O. Box not acceptable)

CAPE CORAL, FL 33904

(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)

FEBRUARY 1, 1996

(Date)