

P96 0000029427  
Date 3-26-96

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

800001762759  
-03/29/96--01064--007  
\*\*\*\*122.50 \*\*\*\*122.50

Re: BRIGHT IMAGINATIONS LEARNING CENTER, Inc.

Gentlemen:

Enclosed please find the original and one copy of the Articles of Incorporation, together with my check in the amount of \$122.50.

This represents the cost of the Filing Fees, Certified Copy of Articles of Incorporation and Registered Agent Designation for the above named corporation.

Very truly yours,

Craig M Roma  
CRAIG M ROMA

Craig Roma GAVE  
AUTHORIZATION BY PHONE TO  
CORRECT RA address/article 5  
DATE 4-7-96  
DOC. EXAM at

BRIGHT IMAGINATIONS LEARNING CENTER

MAILING ADDRESS OF CORPORATION		
6155 FLORIDA AVE S. Suite 14		
LAKELAND, FL 33813		
PHONE		
(941)	648-0336	
Area Code	Number	Ext.

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95 MAR 29 PM 12:16  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## ARTICLES OF INCORPORATION

BRIGHT IMAGINATIONS LEARNING CENTER, INC.  
(name of corporation)

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The undersigned subscriber(s) to these Articles of Incorporation, natural person(s) competent to contract, hereby form a corporation under the laws of the State of Florida.

### ARTICLE I - CORPORATE NAME

The name of the corporation is:

BRIGHT IMAGINATIONS LEARNING CENTER, INC.

### ARTICLE II - DURATION

This corporation shall exist perpetually unless dissolved according to Florida law.

### ARTICLE III - PURPOSE

The corporation is organized for the purpose of engaging in any activities or business permitted under the laws of the United States and the State of Florida.

### ARTICLE IV - CAPITAL STOCK

The corporation is authorized to issue FIVE HUNDRED shares (500) of ONE Dollar(s) (\$ 1.00) par value Common Stock, which shall be designated "Common Shares."

### ARTICLE V - INITIAL REGISTERED OFFICE AND AGENT

The street address of the Initial Registered Agent office and the name of the Initial Registered Agent at that office is:

NAME	<u>CRAIG ROMA</u>		
ADDRESS	<u>6155 Florida Ave. S. Suite 14</u>		
CITY	<u>Lakeland</u>	FLORIDA	ZIP <u>33813</u>

The principal office, if known, or the mailing address of the corporation is:

NAME	<u>BRIGHT IMAGINATIONS LEARNING CENTER, INC.</u>		
ADDRESS	<u>6155 FLORIDA AVE. S. Suite 14</u>		
CITY	<u>LAKELAND</u>	FLORIDA	ZIP <u>33813</u>

### ARTICLE VI - INITIAL BOARD OF DIRECTORS

This corporation shall have TWO (2) directors initially. The number of directors may be either increased or diminished from time to time by the By-Laws, but shall never be less than one (1). The names and addresses of the initial director(s) of the corporation are as follows:

NAME	<u>CRAIG ROMA</u> <u>PRESIDENT</u>		
ADDRESS	<u>1051 NW 185<sup>th</sup> AVE</u>		
CITY	<u>PEMBROKE PINES</u>	STATE <u>FL</u>	ZIP <u>33029</u>
NAME	<u>DEJISE E. BUNBERA</u> <u>SECRETARY TREASURER</u>		
ADDRESS	<u>1051 NW 185<sup>th</sup> AVE</u>		
CITY	<u>PEMBROKE PINES</u>	STATE <u>FL</u>	ZIP <u>33029</u>
NAME			
ADDRESS			
CITY		STATE	ZIP

# ARTICLE VII - INCORPORATORS

The names and addresses of the incorporators signing these Articles of Incorporation are as follows:

NAME	C. R. R. R.		
ADDRESS	1001 NW 125th Ave		
CITY	PEARSON Pines	STATE	FL ZIP 33029
NAME			
ADDRESS			
CITY		STATE	ZIP
NAME			
ADDRESS			
CITY		STATE	ZIP

IN WITNESS WHEREOF, the undersigned subscriber(s) have executed these Articles of Incorporation this 26 day of MARCH, 1976.

C. R. R. R., President (Seal)  
 \_\_\_\_\_ (Seal)  
 \_\_\_\_\_ (Seal)

CERTIFICATE AND ACKNOWLEDGEMENT  
OF REGISTERED AGENT

CERTIFICATE OF REGISTERED AGENT  
OF

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96 MAR 29 PM 12:16

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

BRIGHT IMAGINATIONS LEARNING CENTER, INC.  
(name of corporation)

Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted:  
The above corporation, desiring to organize under the laws of the State of Florida with  
its registered office as indicated in the Articles of Incorporation

at 6155 FLORIDA AVE S., Suite 14  
LAKELAND, FL 33813

has named CRAIG ROMA  
located at the aforesaid address, as its Registered Agent to accept service of process  
within this state.

ACKNOWLEDGEMENT

Having been named as Registered Agent to accept service of process for the above  
stated corporation at the place designated in this certificate, and being familiar with  
the obligations of that position, I hereby accept to act in this capacity, and agree to  
comply with the provisions of Florida Law in keeping open said office.

Craig Roma  
(registered agent)