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TRANSMITTAL LETTER

Department of State Division of Corporations P. O. Box \$327 Tallahassee, FL 32314 STORT 21 PM 1:20
TALLAHASSEE, FLORIDA

SUBJECT: Montessor	i of Tampa Palı	ns, INC		4	
	roposed corporate r	ame - must include su		ソントノリイーーリ	0255 1071004 *****78.75
Enclosed is an original for :	and one (1) co	py of the articles o	f incorporation a	and a chec	k
 \$70.00	x \$78.75	\$122.50	\$131.25		
Filing Fee	Filing Fee & Certificate	Filing Fee & Certified Copy	Filing Fee, Certified Copy		
			& Certificate		
		Additional Cop	y Required		
]	
FROM:	Julia A Diaz				
Name (printed or typed)					
11309 N Grady Ave					
		Address			
Tampa, FL 33624					
City, State & Zip					
813-979-4926					
Daytime Telephone number					

P. CO. 199/

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 Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

Montessori of Tampa Palms, INC

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ARTICLE II PRINCIPAL OFFICE

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

4001 Skipper Rd Tampa, FL 33613

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: (1000) One Thousand

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Julia Diaz 11309 N Grady Ave Tampa, FL 33624

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):

Julia A Diaz 11309 N Grady Ave (President) Tampa, FL 33624

and

BO

others

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

17th day of 02t , 19 97

Julia Diag 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

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:	Montessori of Tampa Palms, INC	
2. The name and address of the reg		97 OC SECRI
	Julia A Diaz	T21 PH
(P.O. 1	11309 N. Grady Ave Box or Mail Drop Box NOT ACCEPTABLE)	1: 20 Lorida
<u> </u>	Tampa, FL 33624 (City/State/Zip)	-
corporation at the place designated agent and agree to act in this capa	d agent and to accept service of process j d in this certificate, I hereby accept the appoi ncity. I further agree to comply with the prov e performance of my duties, and I am familian tered agent.	intment as registered visions of all statutes
Julia Dia; (SIGNAT	\(\sigma\lambda\cdot\gamma\dagger\gamma\d	