P97 TRANSMITTALLED S 844

Department of State Division of Corporations P. O. 6327 Tallahassee, FL 32314 700002372757--4 -12/16/97--01019--006 ******78.75 ******78.75

i alianassee, FL 323 i	'+				
SUBJECT: The	Children's	MUSEUM name – must include s	Collectuffix)	tion, l	りと
(•	Toposou corporate	,	 ,		
Enclosed is an origina for:	il and one (1) copy	of the articles of inc	orporation a	nd a check	
\$70.00	X \$78.75	\$122.50	<u> </u>	\$131.25	
Filing Fee	Filing Fee & Certificate	Filing Fee & Certified Copy	Filing F Certified & Certified	Сору	-
Please return the photo	tocopy to me with t	the filing date stampe	ed on it.	SLURLIARY OF TALLAHASSEE, F	FILED
FROM:	Anna Name (Lenoir printed or typed)		STATE FLORIDA	>
	8390	SW 106th S	£		
	Miam		6		
		, State & Zip		,, e	
		71 - 9099	<u>-</u> .		-
	<u>.</u>	Telephone Number			
	(205) 25	11-109cl le	au mess	1000	

Articles of Incorporation

1. The name of the corporation shall be: The Children'S Museum Collection; Inc. 2. The principal place of business and mailing address of the corporation is: P. D. Boy. 561823
2. The principal place of business and maining address. P. D. Box. 561823 Michael Ha. 33256-1823 The corporation shall have the authority to issue shares of stock. 3. The corporation shall have the authority to issue and the
4. The registered agent of the corporation is Anna Lenoir and the registered street address is \$390 SW 106th St. 200, and The Florida 3 3100.
5. The initial Board of Directors shall have \(\precedent \) member(s) whose name(s) and address(es) is/are as follows: \(\frac{Anna Lenoir}{5000} \)
The number of directors may be raised or lowered by amendment of the bylaws of the corporation but shall in no case be less than one.
6. The incorporator of this corporation is Anna Lenoir whose street address is 3aml
Dated 12-1-97 Onna herfine lest Incorporator

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 am familiar with and accept the obligations of my position as registered agent.

Dated 12 1 97

Registered Agent