TRANSMITTAL LETTER

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Transmittal Letter

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

DIVISION OF COPERATIONS

98 MAR -4 AM 9: 25

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

900002446869---5 -03/04/98--01067--004 *****78.75 ******78.75

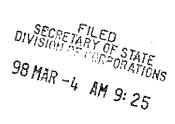
SUBJECT: All About hids Learning Academy Day Care Center,
(Proposed corporate name - must include suffix)

\$70.00 \$78.75 Filing Fee & Certifica	Filing Fee & Certified Copy	□ \$131.25 Filing Fee, Certified Copy & Certificate
	ADDITIONAL CO	OPY REQUIRED
FROM: FRANCOISE PENHA Howell / Frenha-How Name (Printed or typed)		
P.O. Box 530424		
Miami Shores, FC 33153 City, State & Zip		
(305) 31	4-2786 Daytime Telephone number	
Tha Fowlgave BY PHONE TO		

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

CORRECT

DOC. EXAM



ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE 1 NAME The name of the corporation shall be: All About Kids Learning Academy - Day Care Center, In
ARTICLE II PRINCIPAL OFFICE The principal place of business and mailing address of this corporation shall be: 520 NW 103 street mailing address; P.O., Box 530424 Miami, FL 33150 Miami, FL 33150 Miami, FL 33150
ARTICLE III SHARES The number of shares of stock that this corporation is authorized to have outstanding at any one time is:
ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS
The name and Florida street address of the initial registered agent are: FRANCOISE PENHA-HOWELL 88 NW 85 th street Miami, FL 33150
ARTICLE V INCORPORATOR The name and address of the incorporator to these Articles of Incorporation are: FRANCOISE PENHA-HOWELL 88 NW 85th Street Miami, FL 33150
Penha-Howell FRANCOISE Penha-Howell 2/26/98 Signature/Incorporator Date

(An additional article must be add	led if an effective date is requested.)
	rocess for the above stated corporation at the place designated in this agree to act in this capacity. I further agree to comply with the performance of my duties, and I am familiar with and accept the Date