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TRANSMITTAL LETTER

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

SUBJECT: Childcare Designers, Inc.

I enclose an original and 1 copy(ies) of the
Articles of Incorporation for the above corporation and a
check in the amount of \$ 122.50.

Alicia J. Rives

From: Daniel J. Rives
Name
410 Challenger Rd.
Address
Cape Canaveral, FL 32920
City State Zip
(407) 783-3100
Telephone Number

FILED
98 AUG 10 PM 2:51
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. SMITH AUG 13 1998

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION

OF

Childcare Designers, Inc.

ARTICLE I NAME

The name of the corporation shall be:

Childcare Designers, Inc.

ARTICLE II PRINCIPAL OFFICE

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

410 Challenger Rd.
Cape Canaveral, Fl. 32920

ARTICLE III CAPITAL STOCK

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

36,000

ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is:

Alice J. Rives
410 Challenger Rd.
Cape Canaveral, Fl. 32920

ARTICLE V INCORPORATOR

The name and street address of the incorporator to these

Articles of Incorporation is:

Alice J. Rives
410 Challenger Rd.
Cape Canaveral, Fl. 32920

The undersigned has executed these Articles of Incorporation

this 12th day of June 1998.

Alice J. Rives
Incorporator

CERTIFICATE OF DESIGNATION

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:

Childcare Designers, Inc.

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

Alice J. Rives

410 Challenger Rd.

Cape Canaveral, Fl. 32920

Signature:

Alice J. Rives

Title:

Incorporator

Date:

6/12/98

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:

Alice J. Rives

Date:

6/12/98

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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