# P99000028541

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

200002816392--- \$ -03/24/33--01026--004 \*\*\*\*\*78.75 \*\*\*\*\*\*78.75

SUBJECT:	Pare	entCare Sitters Regi (Proposed corpo	stry Inc.	fix)
r desiden	امسندنسد	and one(1) copy of the article		
Enclosed is an a \$70 Filing I	.00	\$78.75 Filing Fee & Certificate of Status	Solution in the second	\$87.50 Filing Fee, Certified Copy & Certificate of Status
FR	ROM: _	Corinthia Loblack Name (I	-Matthew Printed or typed)	
		1045 NE 203 Terr Address		
		City, State & Zip		MAR 24 PN WETARY OF S ATTACKE, FL
		(305) 655-1207	Telephone number	1 2: 4; STATE LORIDA

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

alacter

# ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida

FILED

Business Corporation Act, hereby adopts the following Articles of Incorporation.

99 MAR 24 PM 2: 47

ARTICLE I NAME

The name of the corporation shall be: ParentCare Sitters Registre CRETARY OF STATE

### ARTICLE II PRINCIPAL OFFICE

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

1045 NE 203 Terr Miami, Fl 33179

# <u>ARTICLE III SHARES</u>

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

ONE THOUSAND (1000) SHARES OF COMMON STOCK HAVING PAR VALUE OF ONE DOLLAR (1.00) EACH

## ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

Corinthia Loblack-Matthew \_ 1045 NE 203 Terr Miami, Fl. 33179

### ARTICLE V INCORPORATOR

The <u>name and address</u> of the incorporator to these Articles of Incorporation are:

Corinthia Loblack-Matthew 1045 NE 203 Terr Miami, FL. 33179

Signature/Incorporator

/ Date /

(An additional article must be added if an effective date is requested.)

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/Registered Agent

/Date