P99000 02793

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

DOC. EXAM -

EFFECTIVE DATE

Tallahassee, FL 32314 SUBJECT: (Proposed corporate name - must include suffix) Enclosed is an original and one(1) copy of the articles of incorporation and a check for: **⊠**\$78.75 \$70.00 \$78.75 \$87.50 Filing Fee Filing Fee Filing Fee Filing Fee, & Certificate of Status & Certified Copy Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED SM17H
Name (Printed or typed) FROM: S61 866 - 6932 Daytime Telephone number DATE -

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

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 I NAME The name of the corporation shall be:
KIDKARE CENTERS, INC
ARTICLE II PRINCIPAL OFFICE The principal place of business and mailing address of this corporation shall be:
1121 S. Military Trail PMB 262 DEERFIELD BEACH, FLORIDA 33
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: DIANA. J. SMITH 1121 S. Military Trail PMB 262 DEERPIELD BEACH, PL 33442.
ARTICLE V INCORPORATOR
The <u>name and address</u> of the incorporator to these Articles of Incorporation are:
DIANA Y. SMITH
1121 S. MILITARY TRAIL PMB 262 DEERFIELD BEACH, FL 33442
11/18/99
Signature/Incorporator Date
ARTICLE VI Effective date November 15, 1999.
(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