CREATIVE IMAGINATIONS ACADEMY, INC.

8801 NW 15TH STREET PEMBROKE PINES, FL 33024

NOVEMBER

, 1999

Secretary of State Capitol Building Tallahassee, FL 32304

12/02/99--01060--012 *****70.00 *****70.00

Attention: Corporation Division

RE: CREATIVE IMAGINATIONS ACADEMY, INC.

Dear Sir or Madam,

Please accept for filing, the Articles of Incorporation and the Resident Agent form which designates the Resident Agent for the above-captioned corporation. Enclosed is our check in the amount of \$70.00 to cover the following fees:

Filing Original Articles of Incorporation

\$35.00

Resident Agent Fee

35.00

Total

\$70.00

Cordially,

KATHLEEN A. WICKER

FILED 1999 DEC -2 PM 2: 29

SECRETARY OF STATE TALLAHASSEE, FLORIDA

<u>CERTIFICATE OF INCORPORATION</u> <u>-OF-</u> <u>CREATIVE IMAGINATIONS ACADEMY</u>

The undersigned, for the purpose of forming a corporation under the Florida General Corporation Act, hereby adopts the following Articles of Incorporation:

ARTICLE I. NAME

The name of this corporation is CREATIVE IMAGINATIONS ACADEMY, INC.

ARTICLE II. DURATION

The term of existence of the corporation is perpetual.

ARTICLE III. PURPOSE

The corporation may transact any and all lawful business for which corporations may be incorporated under the Florida General Corporation Act.

ARTICLE IV. CAPITAL STOCK

The aggregate number of shares which the corporation has authority to issue is 1,000,000, all of which shall be common shares with par value of \$0.01.

ARTICLE V. REGISTERED OFFICE

The street address and mailing address of the principal place of business is 8801 NW 15TH STREET, PEMBROKE PINES, FL 33024 and the street address of the initial registered office of the corporation is 8801 NW 15TH STREET, PEMBROKE PINES, FL 33024 and the name of the initial registered agent is KATHLEEN A. WICKER.

ARTICLE VI. DIRECTORS

The Board of Directors of the corporation shall consist of two members, but may be increased or decreased by a resolution of the Board of Directors adopted in the manner provided in the Bylaws of the corporation, provided that in no event shall the Board of Directors consist of less than one member.

The names and addresses of the Directors which constitute the first Board of Directors of the Corporation are:

NAME
ADDRESS

KATHLEEN A. WICKER
1646 ORCHID BEND
WESTON, FL 33327

MARIA L. SARNO
8801 NW 15TH STREET
PEMBROKE PINES, FL 33024

<u>ADDRESS</u>

ARTICLE VII. INCORPORATORS

The name and address of the incorporator of the corporation is:

KATHLEEN A. WICKER

1646 ORCHID BEND
WESTON, FL 33327

IN WITNESS WHEREOF, the undersigned have subscribed their names this

29 + h day of November 1999.

KATHLEEN A. WICKER

May 12 A day of

STATE OF FLORIDA) :ss
COUNTY OF BROWARD)

NAME

On this 2 day of November 1999, before me, the undersigned officers, personally appeared as KATHLEEN A. WICKER and MARIA L. SARNO, known to me to be the persons whose name is subscribed to the within instrument, and acknowledged that they executed the same for the purposes therein contained.

IN WITNESS WHEREOF, I have hereunto set my hand and official seal.

NOTARY PUBLIC, STATE OF FLORIDA AT LARGE



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1999 DEC -2 PM 2: 29

SECRETARY OF STATE TALLAHASSEE, FLORIDA

STATE OF FLORIDA

SECRETARY OF STATE

Certificate designating place of business or domicile for the service of process within this state, naming agent upon whom process may be served and names and addresses of the officers and directors.

CREATIVE IMAGINATIONS ACADEMY, INC.

The following is submitted, in compliance with Chapter 48.091, Florida Statutes:

CREATIVE IMAGINATIONS ACADEMY, INC., a corporation organized under the laws of the state of Florida, with its principal office at 8801 NW 15TH STREET, PEMBROKE PINES, FL 33024 has named KATHLEEN A. WICKER at 1646 ORCHID BEND, WESTON, FL 33327, County of Broward, as its agent to accept service of process within this state.

<u>OFFICERS</u>	TITLES	SPECIFIC ADDRESSES
KATHLEEN A. WICKER	PRESIDENT/DIR.	1646 ORCHID BEND WESTON, FL 33327
MARIA L. SARNO	VICE-PRES./TREAS.	8801 NW 15 TH STREET PEMBROKE PINES, FL 33024

<u>ACCEPTANCE</u>

I agree as Resident Agent to accept service of process: to keep this office open during prescribed hours, to post my name (and any other officers of said corporation authorized to accept service of process at the above Florida designated address) in some conspicuous Place in the office as required by law.

DATED: 11 29 99

Kathleen A. Wicker