# TRANSMITTAL LETTER

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

800003066098--1 -12/03/39--01038--005 \*\*\*\*\*87.50 \*\*\*\*\*87.50

SUBJECT: _	PETIT	ACADEMY,	INC.		
	(Proposed corporate name - must include suffix)				

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

\$70.00

\$78.75

Filing Fee

Filing Fee

& Certificate of Status

**□**\$78.75

\$87.50

Filing Fee

Filing Fee,

& Certified Copy

Certified Copy

& Certificate of

Status

ADDITIONAL COPY REQUIRED

FROM:	NANCY GUIRAND Name (Printed or typed)				
	62 INDIAN TRACE #169 Address				
-	WESTON, FLORIDA 33326 City, State & Zip				
	(954) 873 - 4461 Daytime Telephone number				

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

# ARTICLES OF INCORPORATION

1999 DEC -9 PM 2: 16

FILED

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

SECRETARY OF STATE TALLAHASSEE, FLORIDA

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The name of the corporation shall be:

PETIT ACADEMY, INC.

### ARTICLE II PRINCIPAL OFFICE

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

12830 NE 6th AVE. NORTH MIAMI, FLORIDA 33161

### ARTICLE III SHARES

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

50,000 SHARES

## ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

NANCY GUIRAND

574 SW 169 AVE. WESTON, FLORIDA 33326

#### ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

NANCY GUIRAND

62 INDIAN TRACE #169 WESTON, FLORIDA 33326

Signature/Incorporator

12 / 7 / 99 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

12/7/99

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