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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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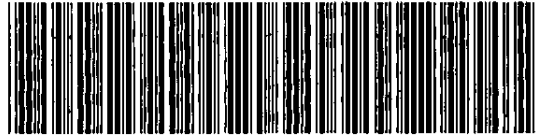
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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## COVER LETTER

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

SUBJECT: Providence Children's Academy, Inc.  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

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

☐ \$70.00  
Filing Fee

☐ \$78.75  
Filing Fee  
& Certificate of Status

☐ \$78.75  
Filing Fee  
& Certified Copy

☒ \$87.50  
Filing Fee,  
Certified Copy  
& Certificate of  
Status

**ADDITIONAL COPY REQUIRED**

FROM: DONNA MORGAN  
Name (Printed or typed)

7620 NW 120 Dr.  
Address

PARKLAND, FL 33076  
City, State & Zip

954.732.2264  
Daytime Telephone number

STMFL@COMCAST.NET  
E-mail address: (to be used for future annual report notification)

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

EIN 27-1126443

**ARTICLES OF INCORPORATION**

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

**ARTICLE I NAME**

The name of the corporation shall be:

Providence Children's Academy, INC.

**ARTICLE II PRINCIPAL OFFICE**

The principal street address and mailing address, if different is:

LOCATION: 611 Lyons Blvd. #207 Coconut Creek,  
Florida 33073  
Mailing: 7620 NW 120 Dr. Parkland, FL 33076

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Child Daycare

**ARTICLE IV SHARES**

The number of shares of stock is: 100

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

List name(s), address(es) and specific title(s):

Donna Morgan President  
Tom Morgan Vice President

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Donna Morgan  
7620 NW 120 Dr. Parkland, FL 33076

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Donna Morgan  
7620 NW 120 Dr. Parkland, FL 33076

\*\*\*\*\*

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Donna Morgan

Signature/Registered Agent

Donna Morgan

Signature/Incorporator

10.16.09

Date

10.16.09

Date

FILED  
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CLERK OF DISTRICT COURT  
JACKSONVILLE, FLORIDA