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TRANSMITTAL LETTER

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

30001col.	oosed corporate	name - must include suff	īx)		
Enclosed is an original a for:	nd one (1) co	ppy of the articles of	incorporation a	and a check	
[] \$70.00 kg	Filing Fee & Certificate	Filling Fee & Certified Copy	Filing Fee, Certified Copy & Certificate		
	: , .	Additional Copy	Required]	
FROM:		. Johnson (printed or typed)			
,	303 SE 1	7th Street, #30	9		
Address					
	Ocala, F	L 34471	· · · · · · · · · · · · · · · · · · ·		
City, State & Zip					
	(352) 6	87-1929			
Daytime Telephone number					

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

FILED SECRETARY OF STATE TALLAHASSEE, FLORIDA

02 DEC 23 AM 2: 07

ARTICLES OF INCORPORATION

OF

UCT, INC.

ARTICLE I: NAME

The name of the corporation shall be UCT, INC.

ARTICLE II: PRINCIPAL OFFICE

The address of the initial registered office of this corporation is 303 SE 17th Street, Suite 309, Ocala, Florida 34471, and the name of its initial registered agent at said address is Sylvia A. Johnson.

ARTICLE III: PURPOSES

This corporation is formed to operate as a CHARITABLE, EDUCATIONAL, and RELIGIOUS, organization.

All operation are to be such as will qualify this corporation as an exempt organization under Section 501 (c)(3) of the Internal Revenue Code.

ARTICLE IV: CORPORATE POWERS

The corporate powers of this corporation are directed by the By-Laws for Not for Profit Corporation and in all operations to qualify as exempt organizations under Section 501 (c)(3) of the Internal Revenue Code.

ARTICLE V: MEMBERSHIP QUALIFICATIONS

The qualifications for membership and the manner of their admission shall be as set forth in the bylaws of the Corporation.

ARTICLE VI: BOARD OF DIRECTORS

The number of directors constituting the initial Board of Directors of this corporation is three (3), and the names and addresses of the persons who are to serve as the initial directors are:

Page 2, UCT, Inc.

NAME ADDRESS

B. Ket Barber 3862 NE 19th Street Circle

Ocala, Florida 34470

Sylvia A. Johnson 303 SE 17th Street, #309

Ocala, Florida 34471

Betty J. Perry 702 SE 36th Avenue

Ocala, Florida 34471

Additional and successive Board of Directors will be selected by the procedure set forth in the by-laws.

ARTICLE VII: AMENDMENTS

This corporation reserves the right to amend or repeal any provisions contained in these articles of Incorporation, or any amendment to them, and any right conferred upon the members is subject to this reservation.

ARTICLE X: DISSOLUTION

Upon dissolution of UCT INC., and the winding up of its affairs, the assets of this corporation shall be distributed exclusively for charitable or religious purposes within the meaning of Section 501 (c)(3) of the Internal Revenue Code of 1954, as amended, or any superseding section.

ARTICLE XI: INCORPORATORS

The names and addresses of the persons forming this corporation are:

B. Ket. Barber 3862 NE 19th Street Circle

Ocala, Florida 34470

Sylvia A. Johnson 303 SE 17th Stree, #309

Ocala, Florida 34471

Betty J. Perry 702 SE 36th Avenue

Ocala, Florida 34471

Dated this 15th day of December, 2002

B. Ket. Barber

Drivers License # 13(1609130)26 Drivers License # 1525-781-42-917-6

Betty J. Perry

Drivers License # P600-1090-35-1522-0

STATE OF FLORIDA

STATE OF FLORIDA COUNTY OF MARION

BEFORE ME, the undersign authority, personally appeared B. Ket Barber, Sylvia A. Johnson, Betty J. Perry, to me producing Drivers License Identification as noted above to verify identification of the persons described and who subscribed the above Articles of Incorporation, and they did freely and voluntarily acknowledge before me according to law that they made and subscribed the same for the uses and purposed therein expressed.

IN WITNESS, WHEREOF, I have hereunto set my hand and my, official seal at Ocala, Marion County, Florida this __/5*__ day of December, 2002,

Having been names 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 statues 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.

December <u>/</u>5_, 2002

OFFICIAL NOTARY SEAL MARK HALMAN COMMISSION NUMBER CC986332

MY COMMISSION EXPIRES OCT. 2,2004 02 DEC 23 AM 2: 07

SECRETARY OF STATE
TALLAHASSEE, FLORIDA