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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. Shivers NET 0 7 2011

COVER LETTER

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

SUBJECT: The Pregnancy Center of Gadsden County, 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 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate	•	
FROM		Printed or typed)	- COLLEGE COLLEGE		
	116 East Sixth	• •	TALLAHASS	11 001-7	The states
	850-539-6246	, State & Zip	Y OF STATE EE, FLOXID	图 2:07	M
	116 E. 6th Aytime	Telephone number		7	

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

E-mail address: (to be used for future annual report notification)

fbc.hav@juno.com

ARTICLES OF INCORPORATION
In compliance with Chapter 617, F.S., (Not for Profit)

ARTICLE I

ARTICLE I	NAME The Pregnancy Center	of Gadsden	County, Inc.
The name of the o	corporation shall be:		-
ARTICLE II	PRINCIPAL OFFICE		
	Principal street address		Mailing address, if different is:
	116 E. 6th Ave.		P.O. Box 573
	Hayana, FL 32333		Havana, FL 32333
ARTICLE III	PURPOSE		
	which the corporation is organized is:		
This non-pro	ofit organization is organized to assist w	omen and n	nen dealing with a planned or
unplanned p	pregnancy to make positive life choices.		
ARTICLE IV	MANNER OF ELECTION The manner in v	which the directo	rs are elected and appointed:
The officers of this vote of the Board of ARTICLE V	corporation shall consist of a president, a vice president, a sof Directors. The same person may hold more than one office INITIAL OFFICERS AND/OR DIRECTOR	e. The Board of Di	surer. All such officers shall be elected annually by a majority rectors shall have authority to fill any vacancy in any office.
	Title: Eric R. Erskine, President		e: Patsy Boyett, Vice President
Address:	220 Country Club Dr	Address:	310 Gilcrease Ln.
	Havana, FL 32333	.	Quincy, FL 32351
Name and	Title: Carol Hutcheson, Secretary/Treasurer	Name and Titl	le:
Address:	573 Gould Rd.	Address:	
	Quincy, FL 32351	-	
		-	
Name and Address:	Title:	Name and Titl Address:	le:
		- -	
ARTICLE VI	REGISTERED AGENT	-	≥o _
The name and F	lorida street address (P.O. Box NOT acceptable) of	the registered ag	
Name:	Eric R. Erskine		
Address:	220 Country Club Dr.	-	CO 2 1 ANNUAL DE LA COLONIA DE
	Havana, FL 32333	-	SSN 7
4 D. W. C. T. 1777	WCOBBOD 4 MOB	-	Te B in
ARTICLE VII	INCORPORATOR ddress of the Incorporator is:		r 0 N P P P P P P P P P P P P P P P P P P
Name:	Carol Hutcheson		97
Address:	573 Gould Rd.	-	3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3
reduction.	Qunicy, FL 32351	-	> 1
Having been na	med as registered agent to accept service of proces	- ss for the above	stated corporation at the place designated in this
certificate, I am j	familiar with and accept the appointment as registere	ed agent and agr	ee to act in this capacity
5/	Clube		October 6, 2011
	Required Signature of Registered Agent		Date
to the Departmer	rument and affirm that the facts stated herein are transfer to the transfer of State constitutes a third degree felony as provide	ue. I am aware t ed for in s.817.15	that any false information submitted in a document 55, F.S.
עני	Required Signature of Incorporator		October 6, 2011
	Required Signature of Incorporator		Date
	Required Signature of incorporator		