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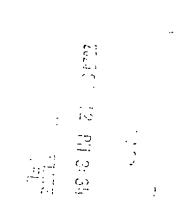
(Requestor's Name)
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PICK-UP WAIT MAIL
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COVER LETTER

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

 $e_{ij} = e_{ij} \cdot e_{ij} \cdot e_{ij} \cdot e_{ij} \cdot e_{ij}$

SUBJECT: RO	sela Alliance	DRATE NAME - MUST INC	
	(PROPOSED CORPO	DRATE NAME - MUST INC	LUDE SUFFIX)
			•
Enclosed is an original	and one (1) copy of the Arti	cles of Incorporation and	a check for:
□ \$70.00 Filing Fœ	© \$78.75 Filing Fec & Certificate of Status	□\$78.75 Filing Fee & Certified Copy	S87.50 Filing Fee, Certified Copy & Certificate
		ADDITIONAL CO	PY REQUIRED
FROM:	Roderick Mi	(Printed or typed)	-
	8901 NW 80	H Dr.	-
	(954) 544 7°	3332 (City, State & Zip	
	(954) 544 7.	785 ne Telephone number	

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

Foderick miller 51 e yahow (om E-mail address: (to be used for future annual report notification)

LLC Into non profit

Certificate of Conversion
For

"Other Business Entity"
Into
Florida Profit Corporation
Non Profit

This Certificate of Conversion and attached Articles of Incorporation are submitted to convert the following "Other Business Entity" into a Florida Profit Corporation in accordance with s. 607.1115, Florida Statutes. 1. The name of the "Other Business Entity" immediately prior to the filing of this Certificate of Conversion is: Enter Name of Other Business Entity 2. The "Other Business Entity" is a ____ (Enter entity type. Example: limited liability company, limited partnership, general partnership, common law or business trust, etc.) first organized, formed or incorporated under the laws of Hood de-(Enter state, or if a non-U.S. entity, the name of the country) "Other Business Entity" was first organized, formed or incorporated 3. If the jurisdiction of the "Other Business Entity" was changed, the state or country under the laws of which it is now organized, formed or incorporated: 4. The name of the Florida Profit Corporation as set forth in the attached Articles of Incorporation: Enter Name of Florida Profit Corporation If not effective on the date of filing, enter the effective date: (The effective date: Cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State.) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Page 1 of 2

Required Signature for Florida Prefit Corporation: Signature of Chairman, Vice Chairman, Director, Officer, or, if Directors or Officers have not been selected, an Incorporator: Lodente mine
Printed Name: Rodente mill Title: President Required Signature(s) on behalf of Other Business Entity: [See below for required signature(s).] Signature: Loders Muse Printed Name: Rodick Miller Title: MGR Printed Name: _______Title: _____ Signanire: Printed Name: _______ Title: ______ Signature: Printed Name: ______ Title: Signature: Printed Name: _______ Title: _____ Signature: Printed Name: ______ Title: _____ If Florida General Partnership or Limited Liability Partnership: Signature of one General Partner. If Florida Limited Partnership or Limited Liability Limited Partnership: Signatures of ALL General Partners. If Florida Limited Liability Company: Signature of a Member or Authorized Representative. All others: Signature of an authorized person. Fees: \$35.00 Certificate of Conversion: Fees for Florida Articles of Incorporation: \$70.00 \$8.75 (Optional) Certified Copy:

Certificate of Status.

\$8.75 (Optional)

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

The name of the	ne corporation shall be: Rosela A	lliance	Inc
ARTICLE II	PRINCIPAL OFFICE		
50	Principal street address: A Park Central Drive		Mailing address, if different is: 901 NW 80th DV
AP+	1726	Ta	marac, FL 33321
Orl	cnb, FL 32839		
	PURPOSE or which the corporation is organized is:		
Rosela	Alliance, Inc is org	unized	exclusively for Charitable,
education	onal, and community dev	lopment ;	surposes within the meaning of
Section	501(C)(3) of the Internal	Revenue	Code. Its activities include,
but are	not limited to, providing:	supportive_	housing, like skills training, wellness
initiativ	cs, educational support, and co	mmunity c	ngagement to strangthen individuals
and com	` '		
ARTICLE IV	MANNER OF ELECTION The manner	in which the dir	ectors are elected and appointed: In the bylans
			
ARTICLE V	INITIAL OFFICERS AND/OR DIRECTO	<u>ORS</u>	
	· Roderick Miller (P)	Name and Title	· Niky McCray (T)
Address	8901 NW 80th Dr	Address:	3901 NW 80H D
	TAMORACIFL, 33821		Jamarac, FL, 33321 (PCE)
	e: Julian Hopkins (M.)		
Address	5044 Park Central Drive	Address:	
	APA 1724		APT 1224
	Orlando, FL, 32839		Panfino Bach, FL 33069
Name and Titl	«Kevin Pearson (S)	Name and Title	e: Christina (OWE CVP)
Address	Sold Park Central Drive	Address:	
	APT 1766		APT 1/02
	Orlando, FL, 32839		Marietta, GA 30000

Name and 110	1	Name and Title:	
Address	3519 W Atlantic Blud	Address:	
	AP+ 1264		
	Pompano Beach, FL, 33069		
Name and Titl	e:	Name and Title:	
Address		Address:	
		<u></u>	
ARTICLE VI	REGISTERED AGENT		
The name and	Florida street address (P.O. Box NOT acc	eptable) of the registered agent is:	t.
Name:	Roderick Miller		t c t
Address:	8901 NW 80th Dr		
	1amarac, FL, 33321		
4 Design in the	T 18/000000 4TOD		
	Address of the Incorporator is:		· ·
Name:	Roderick Miller		· •
Address:	8901 NW 8074 Dr	, , , , , , , , , , , , , , , , , , ,	
	Jamaiac, FL, 33321		
<u>ARTICLE VII</u>	I EFFECTIVE DATE:		
Effective date.	if other than the date of filing:e date is listed, the date must be specific a	(OPTIONAL)	