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## **COVER LETTER**

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

SUBJECT:	THE		ATION CENTER	<u>-</u>
		(PROPOSED CORPOR	ATE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed is a  \$70.0 Filing	0	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate

ADDITIONAL COPY REQUIRED

FROM: CDC Consulting Firm

Name (Printed or typed)

P.O. Box 9632

Address

Ft. Lauderdale, FL 33310

City, State & Zip

954-309-4280

2802 SRDaytime Telephone number

preachjames@odanejames.com

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

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

## ARTICLES OF INCORPORATION

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

DIAISIUN (	DE CORP	ORATIONS

The name of the cor	NAME THE TRANSFORMAT poration shall be:	ION CENTE	ER, INC. DIVISION OF CORPORATIONS
ARTICLE II	PRINCIPAL OFFICE		11 NOV 29 PH 2: 15
	Principal street address		Mailing address, if different is:
	2802 SR 60	<u>.</u>	PASTOR ODANE JAMES
	EAST VALRICO FL 33954	_	545 NW 210th ST # 104
		-	MIAMI, FL 33169
ARTICLE III	PURPOSE		
The purpose for wh	ich the corporation is organized is:		
Exclusively for	Religious, Charitable and Education	al purposes.	including for such purposes the
	ributions to organizations that qualify		
_	, or the corresponding section of an	•	• /
	, or and demodportuning deduction of an	y raidio tax i	
ARTICLE IV	MANNER OF ELECTION The manner in v	which the directo	rs are elected and appointed:
Initial directors	were appointed by the President, ar	nd will hold d	office for a term of four (4) years.
ARTICLE V	INITIAL OFFICERS AND/OR DIRECTOR	RS	` , , <b>,</b>
Name and Titl	le: PRESIDENT/ CEO		e:VICE PRESIDENT/ COO
Address:	ODANE JAMES	Address:	TIFFANY JAMES
	545 NW 210th ST # 104	-	545 NW 210th ST # 104
	MIAMI, FL 33169	_	MIAMI, FL 33169
Name and Titl	le:TREASURER/ DIRECTOR	Name and Titl	e: SECRETARY
Address:	MARVIN POWELL	_ Address:	CHEYENNE EDWARDS
	10742 STANDING STONE DRIVE	-	3515 40th ST SOUTH #40-G
	WIMAUMA, FL 33598	-	ST. PETERSBURG, FL 33711
Name and Titl	le: DIRECTOR	Name and Titl	e: DIRECTOR
Address:	DAFTON JAMES	_ Address:	EULAR NELSON
	1503 SW 161 AVE	_	1321 NW 43rd AVE # 104
	PEMBROKE PINES, FL 33027	-	LAUDERHILL, FL 33313
ARTICLE VI	REGISTERED AGENT		•
	ida street address (P.O. Box NOT acceptable) of	the registered ag	ent is:
Name:	ODANE JAMES		
Address:	545 NW 210th ST # 104	_	
	MIAMI, FL 33169	-	
	<del></del>	-	
ARTICLE VII	<u>INCORPORATOR</u>		
	ess of the Incorporator is:		
Name:	ODANE JAMES	•	
Address:	545 NW 210th ST # 104	•	
	MIAMI. FL 33169	-	
		=	
			stated corporation at the place designated in this
cerajicaie, i am fam	iliar with and accept the appointment as registere	a agent ana agr	ee to act in this capacity
()81-	· ·		11/25/2011
	Required Signature of Registered Agent		Date

I submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Required Signature of Incorporator

## ARTICLE VIII. ASSETS/DISSOLUTION

Upon the dissolution of the organization, assets remaining after settlement of all liabilities, shall be distributed for one or more exempt purposes within the meaning of Section 501©3 of the Internal Revenue Code, or corresponding Section of any future Federal tax code, or shall be distributed to the federal government, or to a state or local government for a public purpose. Any such assets not disposed of, shall be disposed of by the Court of Common Pleas of the County in which the principal office of the organization is then located, exclusively for such purposes or to such organizations operated and organized for such purposes.