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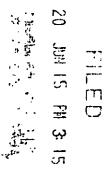
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COVER LETTER

TO:	Registration Section Division of Corporations
SUBJ	ECT: Life Community Enrichment, Inc.
301,,	Name of Corporation – must include suffix
Dear S	ir or Madam:
Affairs	iclosed "Application by Foreign Not for Profit Corporation for Authorization to Conduct its in Florida", "Certificate of Existence", or "Certificate of Status" and check are submitted to r the above referenced not for profit corporation to conduct its affairs in Florida.
Please	return all correspondence concerning this matter to the following:
	Dawna Hubert
	Name of Person
	Life Community Enrichment, Inc.
	Firm/Company
	500 N Central Expwy Suite 325,
	, a.e. 10
	Address
	Plano, Texas 75074 City/State and Zip Code
	~ (i)
	DHubert@lifeassociation.org \(\mathbb{\mathbb{Z}}\)
	E-mail address: (to be used for future annual report notification)
For fur	ther information concerning this matter, please call:
Janet V	
	Name of Person at () Area Code Daytime Telephone Number
	Mailing Address:Street Address:Registration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of TallahasseeTallahassee, FL 323142415 N. Monroe Street, Suite 810Tallahassee, FL 32303
Please 1	ed is a check for the following amount: make check payable to: FLORIDA DEPARTMENT OF STATE 1.00 Filing Fee \$\Bigsim \$\$78.75 Filing Fee & \$\Bigsim \$\$\$Certificate of Status \$\Bigsim \$\$\$Certificate of Status \$\Bigsim \$\$\$Certified Copy

APPLICATION BY FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN FLORIDA

IN COMPLIANCE WITH SECTION 617.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN THE STATE OF FLORIDA:

(Name of corpo	ity Enrichment, Inc.				
import in langua in the name at p	ration: must include the word "INCORPORATED" or "CORPORATION" or words or a age as will clearly indicate that it is a corporation instead of a natural person or partnersh resent. "Company" or "Co." may not be used as a corporate suffix by a nonprofit corpora	bbreviatip if not ation.)	ions o so coi	l like ntained	
(If name unava	illable in Florida, enter alternate corporate name adopted for the purpose of transacting b	usiness	in Flo	rida)	
Texas	3 82-3447698				
 (State or com 	ite or country under the law of which it is incorporated) (FEI number, if applicable)				
November 14.	2017				
(1	2017 5. (Date of duration, if other than	n perpet	ual)		
	ucted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S. to dete				
Date first cond	acted affairs in Florida it prior to registration. See sections 617.1501 & 617.1502, F.S. to det	ermine j	renalty	· liability.)	
500 N Central	Expwy Suite 325, Plano, TX 75074				
	(Principal office street address)		-		
	· ——				
	(Current mailing address, if different)				
			F. 3		
Support to indi	viduals in need including the elderly, disabled and juveniles corporation authorized in home state or country to be carried out in the state of Florida).		6		
Purpose(s) of c	corporation authorized in home state or country to be carried out in the state of Florida)	. #			
	eet address of Florida registered agent: (P.O. Box NOT acceptable)	# # · · · · · · · · · · · · · · · · · ·	S M		
	Registered Agents Inc.	νţ	PH	m	
Name					
Name: ice Address:	7901 4th St N, STE 300,	_ 			
Name: ice Address:	Registered Agents Inc. 7901 4th St N, STE 300, St. Petersburg , Florida 33702 (Zip Code)		ا چا		

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

A. DIRECTOI ≣Chairman	Name: John Ziglar	□ Chairman	Name:		
□ Vice Chairman	Address: 500 N Central Expwy Suite 325,	□Vice Chairman	Address: 500 N Central Expwy Suite 325		
∃Director	Plano, TX 75074	■Director	Plano, TX 75074		
]President		President			
Vice President		□ Vice President			
]Secretary	□ Treasurer	☐ Secretary	Treasurer		
Other:	□ Other:	□Other	□ Other:		
]Chairman	Name: Gail Q Hubert	□Chaiman	Cheryl Landry Name:		
l Vice Chairman	Address: 500 N Central Expwy Suite 325,	□ Vice Chairman	Address: 500 N Central Expwy Suite 325		
Director	Plano, TX 75074	□Director	Plano, TX 75074		
iPresident		□President			
Vice President		□Vice President	20		
1Secretary	□Treasurer	■ Secretary	□Tieasu ter		
]Other:	☐ Other:	Other	@Other Ca		
IChainnan IVice Chairman	Name: Patricia Lister Address: 500 N Central Expwy Suite 325.		Name. □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □		
Director	Plano, TX 75074	□Director			
lPresident		□President			
l Vice President		☐ Vice President			
1Secretary	□Treasurer	☐ Secretary	□Treasurer		
Other:	☐ Other:	□Other:	□Other:		

Corporations Section P.O.Box 13697 Austin, Texas 78711-3697



Office of the Secretary of State

Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for LIFE Community Enrichment, Inc. (file number 802860184), a Domestic Nonprofit Corporation, was filed in this office on November 14, 2017.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on June 02, 2020.



Phone: (512) 463-5555

Prepared by: SOS-WEB

Ruth R. Hughs Secretary of State

n: (512) 463-5709 -- TID: 10264 Dial: 7-1-1 for Relay Services Document: 973676990004