N00000001590

TRANSMITTAL LETTER

1999 MAY 18 AN 7: 1

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

SUBJECT: New Harizon Christian Center, cher
(Proposed corporate name - must include suffix)

100002878471----05/18/99--01039--007 ****122,50 *****78.75

Enclosed is an original and one (1) copy of the articles of incorporation and a check for: \$70.00 \$78.75 \$122.50 \$131,25 Filing Fee Filing Fee Filing Fee Filing Fee, & Certified Copy & Certificate Certified Copy & Certificate FROM: Daytime Telephone number

Q) Kg



March 10, 2000

TANGERINE HOPE 1917 S W 3RD STREET OCALA, FL 34474

SUBJECT: NEW HORIZON CHRISTIAN CENTER, INC.

This letter will confirm that due to a clerical error the above referenced corporation was incorrectly filed as a PROFIT P99000046240 corporation. Please be advised, we have corrected our records to reflect this corporation as a NON-PROIT N0000001590 corporation and assigned new document number N00000001590 with the original file date of May 18, 1999.

Any annual reports/uniform business reports submitted this office should reflect the new document number.

We sincerely apologize for any inconvenience this error may have caused you.

Should you have any questions please feel free to contact this office at the address indicated below.

Letter number: 700A00013554

Sincerely, Kimberly Rolfe Corporate Specialist Supervisor New Filings Section

ARTICLES OF INCORPORATION NON-PROFIT

OF

NEW HORIZON CHRISTIAN CENTER, INC.

The undersigned, for the purpose of forming a Non-profit Corporation pursuant to Florida law, Section 617 hereby certifies as follows:

> ARTICLE I NAME

The name of this Corporation Not For Profit shall be: NEW HORIZON CHRISTIAN CENTER, INC.

> ARTICLE II PURPOSE

The purpose for which the corporation called NEW HORIZON CHRISTIAN CENTER, INC. is organized are exclusively religious, charitable, scientific, literary and educational within the meaning of section 501 (C)(3) of the Internal Revenue Code of 1986 or the corresponding provision of any future United States Internal Revenue Law.

> ARTICLE III TERM OF EXISTENCE

This corporation shall have perpetual existence.

ARTICLE IV LOCATION

The principal office of the Corporation in the State of Florida is located:

> 1917 S. W. 3rd Street Ocala, Florida 34474

ARTICLE V SUBSCRIBER AND REGISTERED AGENT

The name and address of the Subscriber and Registered Agent to these Articles is:

TANGERINE HOPE 1917 S. W. 3RD STREET OCALA, FLORIDA 34474

> ARTICLE VI DIRECTOR

The Directors of this Corporation shall be:

Director: TANGERINE HOPE

1917 S. W. 3RD STREET OCALA, FLORIDA 34474

Director: CARLOTTA FARREL

2221 S. E. 14TH AVE. #77 OCALA, FLORIDA 34471

Director: SANDRA EVERETT

6479 N. W. 6 AVENUE OCALA, FLORIDA 34475

ARTICLE VII QUALIFICATION OF MEMBERS

Members shall be freely admitted to the Corporation, who are willing to promote the purpose of this corporation. The qualification of members shall be set by the by-laws of the corporation. Men, Women, Boys and Girls will be freely accepted to the membership.

ARTICLE VIII MANAGEMENT

The daily affairs of the Corporation are to be managed by the Minister, who serves on a permanent basis, or a person designated by her to assist in the management of the corporation.

ARTICLE IX MINISTER

The Minister shall serve as Minister and Office of the said corporation.

ARTICLE X DIRECTOR

The Board of Directors shall be composed of not less than (3) members. The Board of Advisors shall be elected by the Board of Directors and members. The Board of Directors and Advisors shall also prepare a set of by-laws for the body of the church organization. The Board of Director shall be voted upon after each term after the initial appointing of the Directors by the Founder and/or President.

ARTICLE XI

The County in the State of Florida where the principal office and registered agent for the transaction of the activities of the corporation is located in MARION County.

ARTICLE XII

The property of this corporation is irrevovalby dedicated to the charitable purpose and no part of the net income or assets of this organization shall ever insure to the benefits of any private person. Upon dissolution of the organization assets shall be distributed for one or more exempt purposes within the meaning of section 501 (C) (3) if the Internal Revenue Code or corresponding section of any future federal tax code, or shall be distributed to the Federal, State or local government for public purposes. Any such assets not so disposed of shall de disposed of by the Court of Common Pleas of the county in which the principal office of the organization is then located, exclusively for which purposes.

Subscriber and Registered Agent

WHITE STREET

State of Florida

SS

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County of

BEFORE ME, The undersigned authority, personally appeared who is well known to me to the person described herein who subscribes to the above Articles of Incorporaiton.

IN WITNESS WHEREOF, I have hereunto set my hand and official seal in OCALA , Florida, County of MARION , this 15TH day of MAY 1999 .

Florida

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provision of Section 607.325, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered agent, in the State of Florida.

NEW HORIZON CHRISTIAN CENTER, INC. 2. The name and address of the registered agent and office is; TANGERINE K. HOPE (NAME) 1917 S. W. 3RD STREET (ADDRESS - P. O. BOX NOT ACCEPTABLE) OCALA, FLORIDA 34474 (CITY/STATE ZIP) SIGNATURE TITLE Tresident DATE 1917 S. W. STREET (CITY/STATE ZIP) SIGNATURE TITLE TO ACT IN THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND FURTHER AGREE TO COMPLY WITH PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETED PERFORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325, FLORIDA STATUTES.	1. The name of the corporation is
(NAME) 1917 S. W. 3RD STREET (ADDRESS - P. O. BOX NOT ACCEPTABLE) OCALA, FLORIDA 34474 (CITY/STATE ZIP) SIGNATURE ARCELORIDA TITLE President DATE HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND FURTHER AGREE TO COMPLY WITH PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETED PERFORMANCE OF MY DUTIES,	NEW HORIZON CHRISTIAN CENTER, INC.
(NAME) 1917 S. W. 3RD STREET (ADDRESS - P. O. BOX NOT ACCEPTABLE) OCALA, FLORIDA 34474 (CITY/STATE ZIP) SIGNATURE ARCELORIDA TITLE President DATE HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND FURTHER AGREE TO COMPLY WITH PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETED PERFORMANCE OF MY DUTIES,	2. The name and address of the registered agent and office is:
1917 S. W. 3RD STREET (ADDRESS - P. O. BOX NOT ACCEPTABLE) OCALA, FLORIDA 34474 (CITY/STATE ZIP) SIGNATURE DATE TITLE Fresident DATE 5/15/99 HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND FURTHER AGREE TO COMPLY WITH PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETED PERFORMANCE OF MY DUTIES,	TANGERINE K. HOPE
OCALA, FLORIDA 34474 (CITY/STATE ZIP) SIGNATURE Arroland Florid TITLE President DATE HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND FURTHER AGREE TO COMPLY WITH PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETED PERFORMANCE OF MY DUTIES,	1917 S. W. 3RD STREET
CALA, FLORIDA 344/4 (CITY/STATE ZIP) SIGNATURE AND MODEL TITLE President DATE 5/15/99 HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND FURTHER AGREE TO COMPLY WITH PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETED PERFORMANCE OF MY DUTIES,	(ADDAGO - F. O. DOA NOT ACCELIADED)
SIGNATURE MANGE NO PL TITLE President DATE 5/15/99 HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND FURTHER AGREE TO COMPLY WITH PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETED PERFORMANCE OF MY DUTIES,	OCALA, FLORIDA 344/4
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	CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND FURTHER AGREE TO COMPLY WITH PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETED PERFORMANCE OF MY DUTIES,

5/15/99