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TRANSMITTAL LETTER

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

*****70.00

\$70.00 Filing Fee

103-153

978.75 Filing Fee &

Certificate of

Status

\$78.75

Filing Fee & Certified Copy \$87.50

Filing Fee,

Certified Copy

& Certificate

ADDITIONAL COPY REQUIRED

Name (Printed or typed)

259-6211 EXT 1225

Daytime Telephone number

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

ARTICLES OF INCORPORATION

The undersigned incorportor, for the purpose of forming a corporation under the Florida Not for profit Corporation Act, hereby adopt(s) the following Articles of Incorporation:

ARTICLE I NAME

The name of the corporation shall be: People Reaching Out, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be: Rt 2 Box 6-D

Sanderson, Florida 32087

ARTICLE III PURPOSE(S)

The specific purpose(s) for which this corporation is organized is(are):

To provide the children of the Sanderson community an opportunity to achieve academic execellence, develop high self-esteem, enhance social well being.

ARTICLE IV MANNER OF ELECTION OF DIRECTORS

The manner in which the directors are elected or appointed is:

The directors will be appointed by the founder of People Reaching Out, Inc. Afterwards all new members will be elected in accordance with the development of the By-Laws.

ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

Joann H. Lewis

Rt_ 2 _Box_ 6-D Sanderson, Florida 32087

ARTICLE VI INCORPORATOR

The name and address of the Incorporator of these Articles of Incorporation are:

Leonard E. Lewis

P.O. Box 262

Sanderson, Florida 32087

Signature/Incorporator

(An additional article must be added if an effective date is requested.)

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, amd I am familiar with an accept the obligations of my position as registered agent.

Signature/Registered Agent