

TRANSMITTAL LETTER

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

NOV 06/89

SUBJECT: LCC Cancer Support Group/Lindel's Keaton
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

700003381767--0
-09/05/00--01096--004
*****87.50 *****87.50

Enclosed is an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00
Filing Fee

☐ \$78.75
Filing Fee &
Certificate of
Status

☐ \$78.75
Filing Fee
& Certified Copy

☒ \$87.50
Filing Fee,
Certified Copy
& Certificate

ADDITIONAL COPY REQUIRED

FROM: Lindel Keaton
Name (Printed or typed)

P.O. BOX 4025
200 AVE. K SE Apt 247
Address

Winter Haven, FL 33885-4025
33880
City, State & Zip

863-401-2705
Daytime Telephone number

FILED
00 SEP 18 PM 4: 01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

72 9/18/08
12-23-48



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

September 11, 2000

LINDEL KEATON
200 AVE K SE, APT 247
WINTER HAVEN, FL 33880

SUBJECT: LCC CANCER SUPPORT GROUP
Ref. Number: W00000022148

We have received your document for LCC CANCER SUPPORT GROUP and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of the corporation must contain a corporate suffix. This suffix may be: CORPORATION, CORP., INCORPORATED, or INC. Sections 617.0401(1)(a) and 617.1506(1), Florida Statutes, prohibits the use of the word COMPANY or CO. in the name of a non-profit corporation.

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with a telephone number where you can be reached during working hours.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6915.

Pamela Hall
Document Specialist

Letter Number: 900A00047838

ARTICLES OF INCORPORATION

The undersigned incorporator, 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: LCC Cancer Support Group, Inc. The Above cited name will remain unless otherwise voted as the Board of Director or changed by the Founder of the organization

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

The principal place is currently located
200 Ave K SE
Winter Haven, Fla. 33885 / P.O. Box 4025

ARTICLE III PURPOSE(S)

The specific purpose(s) for which the corporation is organized is(are): To provide Care, Treatment and Counseling for Chronic Cancer Victims. To provide the most modern awareness techniques to raise their cultural understanding reference to their condition and how to care properly for the body.

ARTICLE IV MANNER OF ELECTION OF DIRECTORS

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

The Affairs of this Corporation will be governed by the Board of Directors, who shall be elected newly members as Assigned yearly.

ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Rev. Lindel Keaton
200 Ave K SE.
Winter Haven, Fla. 33885

ARTICLE VI INCORPORATOR

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

Rev. Lindel Keaton
200 Ave K SE
Winter Haven, Fla 33885

x Rev. Lindel Keaton
Signature/Incorporator

x 8-21-20
Date

(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, and I am familiar with and accept the obligations of my position as registered agent.

x Rev. Lindel Keaton
Signature/Registered Agent

x 8-21-20
Date