## TRANSMITTAL LETTER Department of State Division of Corporations TRANSMITTAL LETTER

P. O. Box 6327 Tallahassee, FL 32314

| SUBJECT: Chil           | VEN OF THE<br>PROPOSED CORPORA               | Trinity, In  | C.<br>DE SUFFIX)                                | <del></del> .   | · · · · · · · · · · · · · · · · · · · |
|-------------------------|--|--|---|-----------------|---------------------------------------|
| _                       | _  | les of incorporation and a                           | TALLAHASSEE, The check for:                     | SECHETARY OF ST | APPROVED PLED                         |
| ☐ \$70.00<br>Filing Fee | ☐ \$78.75 Filing Fee & Certificate of Status | ✓ \$78.75 Filing Fee & Certified Copy  ADDITIONAL CO | \$87.50 Filing Fee, Certified Cop & Certificate | y B             |                                       |
|                         |  |  | T I I I I I I I I I I I I I I I I I I I         |                 |                                       |

| FROM: Paige Reauvois Name (Printed or typed)   | 9000036723394<br>-02/09/0101036017<br>       |
|--|--|
| E19 Quintilian Ave. Address                    | -<br>  |
| <u>Driando</u> , FC 32009<br>City, State & Zip | O1 FEB  O1 FEB  DEPARTA DEVISION OI  TALLAHA |
| (950) 350-9404  Daytime Telephone number       | CEIVE<br>3-9 M<br>FCORPORT<br>4SSEE, FL      |
| NOTE: Please provide the original and one con- |  |

E T.SMITH FEB 09 2001



| ARTICLES OF INCORPORATION In Compliance with Chapter 617, F.S., (Not for Profit)   |   |
|--|---|
| ARTICLE I NAME The name of the corporation shall be:   |   |
| Children of the Trinity,   | $I$ $\mathcal{M}$   |
| ARTICLE II PRINCIPAL OFFICE  The principal place of business and mailing address of this corporate   | ation shall be:   |
| BIG Quintilian Avenue<br>Orlando, FL 32809   |   |
| The purpose for which the corporation is organized is:   | en e  |
| Assist underprivaleged Chilo countries, primarily Hait   | iren in-Ihird world   |
| ARTICLE IV MANNER OF ELECTION  The manner in which the directors are elected or appointed:   | ne n  |
| As stated in   | the by kins.  |
| ARTICLE V INITIAL DIRECTORS/OFFICERS The name and addresses:   | ·   |
| Paige Beauvais - Foun<br>Clelie Beauvais (VP.)<br>Jean o. Beauvais(5)  | der (p)  AEGER AF   |
| ARTICLE VI INITIAL REGISTERED AGENT AND ST. The name and Florida street address of the registered agent is:  | [O]S  |
| Paige Beauvais BIG Quintilian Avenue oriando, FL 32609   | AH II: 19 OF STATE FLORIDA  |
| ARTICLE VII INCORPORATOR The name and address of the Incorporator is:  | A   |
| Paige Beauvais<br>819 Quintilian Avenue<br>Oriando, EL 32809   |   |
| **************   | *********   |
| wing been named as registered agent to accept service of process for the<br>signated in this certificate, I am familiar with and accept the appointment<br>pacity. | above stated corporation at the place at as registered agent and agree to act in this |
| 2,00000000   |   |
| gnature/Registered Agent   | Date  |
| 01000000   | 2.0.01  |
| mature Theorporator  | Date  |