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Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850) 205-0381

From: Account Name : FAS-T CORP. AGENTS, INC.
Account Number : 071001002335
Phone : (305) 599-0839
Fax Number : (305) 716-0346

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FLORIDA NON-PROFIT CORPORATION

BLANCHE'S PLACE, INC.

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$78.75

W02-3770

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:

Blanche's Place, Inc.

ARTICLE II PRINCIPAL OFFICE

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

10800 SW 172 St
Miami, FL 33157

ARTICLE III PURPOSE(S)

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

This corporation has been organized to operate an emergency shelter(s) for children, families, or other individuals who may require such an emergency shelter(s) for their safety in periods of financial or social emergency.

ARTICLE IV MANNER OF ELECTION OF DIRECTORS

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

The method of electing the directors will be stated in the bylaws.

ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Carlos E. Garcia C.P.A., P.A.
4995 NW 72 Ave #206
Miami, FL 33166

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ARTICLE VI INCORPORATORS

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

Joel Price
10800 SW 172 St
Miami, FL 33157

X Joel Price 2/6/02
Signature/Incorporator 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.

[Signature] 2-5-02
Signature/Registered Agent Date

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