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(Requestor's Name)

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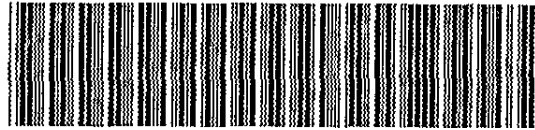
(Business Entity Name)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



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TRANSMITTAL LETTER

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

SUBJECT: A Caring Pregnancy Center, Inc.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

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: Melissa Lasseter
Name (Printed or typed)

13925 N.E. 1st Avenue
Address

Miami, FL 33161
City, State & Zip

(305) 775-5173
Daytime Telephone number

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

Articles of Incorporation

Of

A Caring Pregnancy Center Inc.

The undersigned, acting as incorporator(s) of a corporation pursuant to chapter 617, Florida Statutes, adopt (s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

A Caring Pregnancy Center, Inc.

ARTICLE II PRINCIPAL PLACE OF BUSINESS AND MAILING ADDRESS

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

1086 N.E. 96 Street
Miami Shores, FL 33138

ARTICLE III PURPOSES

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

To provide education and support to women of all ages regarding women's health issues.

To provide education and support to men of all ages regarding past, present and future reproductive decisions and the consequences thereof.

Any lawful purpose or purposes not for pecuniary profit and not specifically prohibited to corporations under the laws of the State of Florida.

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ARTICLE IV
MANNER OF ELECTION OF OFFICERS

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

The method of election or appointment of directors shall be stated in the bylaws.

ARTICLE V
LIMITATION OF CORPORATE POWERS

The corporate powers of this corporation are as provided in section 617.0302, Florida Statutes.

ARTICLE VI
INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is:

Cesar A. Sastre
1086 N.E. 96 Street
Miami Shores, FL 33138

ARTICLE VII
INCORPORATOR(S)

The name(s) and street address(es) of the incorporators(s) to these Articles of Incorporation is (are):

Cesar A. Sastre
1086 N.E. 96 Street
Miami Shores, FL 33138

Melissa Lasseter
13925 N.E. 1 Avenue
Miami, FL 33161

Harry Watkins
18401 N.E. 21 Place
North Miami Beach, FL 33179

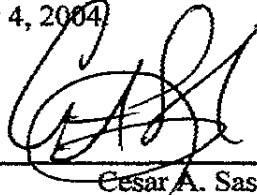
ARTICLE VIII
IDEMNIFICATION

The corporation shall indemnify any officer or director, or any former officer or director to the full extent permitted by law.

ARTICLE IX
AMENDMENT

This corporation reserves the right to amend or repeal any provisions contained in these articles of incorporation, or any amendment hereto, and any right conferred upon the shareholders is subject to this reservation.

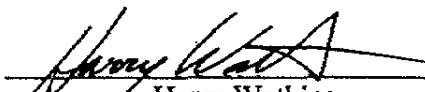
IN WITNESS WHEREOF, the undersigned incorporator has executed these articles of incorporation this ____ day of February 4, 2004



Cesar A. Sastre




Melissa Lasseter



Harry Watkins

WITNESS my hand and official seal this Feb 9, 2004.



Name: CHRISTINA PORRAS

Notary Public, State of Florida



**Designation and Acceptance of
Registered Agent for a Florida Corporation**

Pursuant to the provisions of sections 607.0501. or 617.0501 Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/agent in the State of Florida.

1. The name of the corporation is:

A Caring Pregnancy Center, Inc.

2. The name and address of the registered agent is:

Cesar A. Sastre
1086 N.E. 96 Street
Miami Shores, FL 33138

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ACCEPTANCE

Having been named as registered agent and designated to accept service of process for the above corporation, 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.

Dated: February 4, 2004


Cesar A. Sastre

WITNESS my hand and official seal this Feb 9, 2004.



Christina Porras
Name: CHRISTINA PORRAS

Notary Public, State of Florida