

N04000002887

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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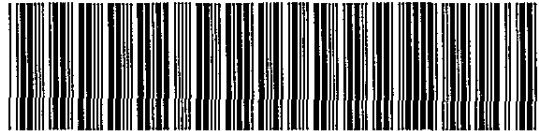
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

3/20/04

## TRANSMITTAL LETTER

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

**SUBJECT:** HOUSE OF LOVE OUTREACH MINISTRY, 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:** ELISA B. LEON  
Name (Printed or typed)

1715 NORTH MAIN STREET  
Address

JACKSONVILLE, FL 32206  
City, State & Zip

(904) 475-0939  
Daytime Telephone number

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

## ARTICLES OF INCORPORATION

In Compliance with Chapter 617, F.S., (Not for Profit)

### **ARTICLE I NAME**

The name of the corporation shall be:

HOUSE OF LOVE OUTREACH MINISTRY, INC.

### **ARTICLE II PRINCIPAL OFFICE**

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

1715 NORTH MAIN STREET  
JACKSONVILLE, FL. 32206

### **ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

MINISTERING TO THE FAMILIES, FEEDING THE HUNGRY AND HELPING THE NEEDY

### **ARTICLE IV MANNER OF ELECTION**

The manner in which the directors are elected or appointed:

GOVERNED BY THE BYLAWS

### **ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS**

List name(s), address(es) and specific title(s):

Elsa B. Leon - 145 W. 11th Street, Jacksonville, Fl. 32206 - CEO/Founder/Director  
Nono Johnson - 1934 W. 24th Street, Jacksonville, Fl. 32209 - Vice=President/Treasurer  
Tanya Baker - 7610 Blanding Blvd., Apt #10, Jacksonville, Fl. 32244 - Director  
Salena Walker, 145 W. 11th Street, Jacksonville, Fl. 32206 - Director  
Cassandra Conyers - 5567 Gable Lane, Jacksonville, Fl. 32211- Secretary

### **ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS**

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

ELISA B. LEON  
1715 NORTH MAIN STREET  
JACKSONVILLE, FL. 32206

### **ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

CASSANDRA CONYERS  
5567 GABLE LANE  
JACKSONVILLE, FL. 32211

\*\*\*\*\*

*Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity.*

Elsa B. Leon

Signature/Registered Agent

3/15/04  
Date

Cassandra Conyers

Signature/Incorporator

03/15/04  
Date