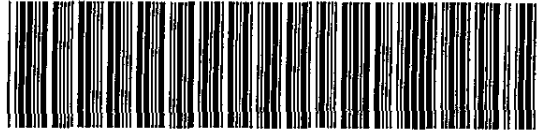


N04000003653

(Requestor's Name)

(Address)

(Address)



600029515846

FROM: OPEN ARMS WOMEN INTERNATIONAL CENTER  
11908 N US HWY 301  
~~LEESBURG~~ FL. 34748 34484  
OXFORD

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

03/10/04--01032--014 \*\*78.75

Special Instructions to Filing Officer:

Office Use Only

W- 10603

FILED  
04 MAR 10 PM 12:12  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

4/12

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be:

OPEN ARM'S WOMEN INTERNATIONAL MINISTRY INC

ARTICLE II PRINCIPAL OFFICE

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

11908 N. US HWY 301 OXFORD FL. 34484

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

WOMEN'S RECOVERY FAITH BASE CENTER.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:

BY THE INCORPORATOR AT AN ANNUAL MEETING.

ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS

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

SONIA N. RAMIREZ PRESIDENT  
2995 W. MAIN ST. LEESBURG FL. 34748.

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

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

SONIA N. RAMIREZ  
2995 W. MAIN ST LEESBURG FL. 34748

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

SONIA N. RAMIREZ  
2995 W. MAIN ST LEESBURG FL. 34748

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

Sonia N. Ramirez  
Signature/Registered Agent

03-08-04  
Date

Sonia N. Ramirez  
Signature/Incorporator

03-08-04  
Date

04 MAR 10 PM 12:12  
FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA