

N 04000009540

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

(Document Number)

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STC 101  
OVC 101

## TRANSMITTAL LETTER

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

**SUBJECT:** Open Arms Community Outreach 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: Keshia White

Name (Printed or typed)

1715 E. Jackson St

Address

Orlando, FL 32801

City, State & Zip

407-616-2520

Daytime Telephone number

04 OCT -7 PM 3:43  
SECRET  
DIVISION OF CORPORATIONS  
STATE OF FLORIDA

**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:

Open Arms Community Outreach Center *Inc.*

**ARTICLE II PRINCIPAL OFFICE**

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

3941 W. Columbia St.  
Orlando, FL 32805

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

To establish and maintain a Community Outreach Center, in Orlando, Orange County and throughout the Continent on the United States of America, to promote the interest of humanitarian efforts through community programs which meet the needs of the community and improve the quality of life, to buy, lease, manage, mortgage, own and rent real and personal property necessary and proper to maintain a community outreach center, to establish a School of the

**ARTICLE IV MANNER OF ELECTION**

The manner in which the directors are elected or appointed:

By majority voting at the annual business meeting.

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

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

Rose Cain, 5388 Lily St. Orlando, FL 32811, President  
Pauline Lindsay, 4216 Pine Hills Rd. Orlando, FL 32808, Vice President  
Keshia White, 1715 E. Jackson St. Orlando, FL 32801, Treasurer  
Catrena Ross, 4431 Bleasdale Ave. Orlando, FL 32808, Secretary  
Elliot White, 1715 E. Jackson St. Orlando, FL 32801, Member  
Andrew Sinclair, 727 Bogie Ct Kissimmee, FL 34759, Member

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

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Rose Cain 5388 Lily St. Orlando, FL 32811

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Rose Cain 5388 Lily St Orlando, FL 32811

RECEIVED  
DIVISION OF REVENUE  
04 OCT -7 PM 3:43

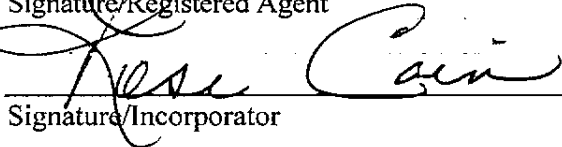
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Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity.



Signature/Registered Agent

10/4/04  
Date



Signature/Incorporator

10/4/04  
Date