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## TRANSMITTAL LETTER

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

Enclosed is an original a	nd one(1) copy of the Arti	cles 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: TAMMY L. CAKSACKKAR  Name (Printed or typed)
2095 NE 43RD ST. Address
OCALA, FL 34479 City, State & Zip
(352) 362 - 352Z  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:			
FAMILY RESOURCE L	CONLITION, INC.		
The principal place of business and ma  2095 NE 43RD ST.  OCALA, FL 34479	CE iling address of this corporation shall be:		<del>-</del> ,
ARTICLE III PURPOSE The purpose for which the corporation  ASSISTING FAMILIA  SPECIAL NEEDS C	KS WITH		
ARTICLE IV MANNER OF ELE The manner in which the directors are		merce =	
DIRECTORS ARE AF	POINTED BY EXECUTIVE	- -	
List name(s), address(es) and specific to TANMY L. CAKSACKKA 2095 NE 43RD ST			K
OCALA, FL 34479 EXEC. DIRECTOR	DIRECTOR		176
EXEC. DIRECTOR  ARTICLE VI INITIAL REGIST	ERED AGENT AND STREET ADD  (P.O. Box NOT acceptable) of the regist  KAR  ator is:	DIRECTOR RESS	176
ARTICLE VI INITIAL REGIST The name and Florida street address TAMMY L. CAKSACK, 2095 NE 43RD ST.  OCALA, FL 34479  ARTICLE VII INCORPORATOR The name and address of the Incorpor TAMMY L. CAKSACK 2095 NE 43RD ST.  OCALA, FL 34479	ERED AGENT AND STREET ADD  (P.O. Box NOT acceptable) of the regist  AR  ator is:  KAR  *********************************	PRIOND BEACH, FL 32 DIRECTOR  RESS  ered agent is:  VISION F CORPURATION  ***********************************	176
ARTICLE VI INITIAL REGIST The name and Florida street address TAMMY L. CAKSACK, 2095 NE 43RD ST.  OCALA, FL 34479  ARTICLE VII INCORPORATOR The name and address of the Incorpor TAMMY L. CAKSACK 2095 NE 43RD ST.  OCALA, FL 34479  **********************************	ERED AGENT AND STREET ADD  (P.O. Box NOT acceptable) of the regist  (P.A. R.  Rator is:  (KAR)  ***********************************	PRIOND BEACH, FL 32 DIRECTOR  RESS  ered agent is:  VISION F CORPURATION  ***********************************	