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2005 SEP - I AM 9: 56

of 9/2/05

TRANSMITTAL LETTER

2005 SEP - 1 AM 9: 56

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

	(PROPOSED CORPORA	TE NAME – <u>MUST INCLUI</u>	<u>DE SUFFIX</u>)
. ,,,	I	·	a ala ada Cau
is an original and \$70.00 illing Fee	□ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate
FROM: F	Robeen Robinson	ADDITIONAL CO	PPY REQUIRED
	Name (I 112 N. Betty Ln	Printed or typed) Address	— <u>— — — — — — — — — — — — — — — — — — </u>

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

Daytime Telephone number

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be:

Spiritual Woman & Associates Inc

LIGHT OF STATE

TALLAHASSEE FLORIDA

ARTICLE II PRINCIPAL OFFICE

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

112 N. Betty Ln Clearwater, FI 33755

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To provide services that include but not limited to housing, financial assistance, publication, counseling, for low income families, elderly and disabled person for the sole purpose of social, environmental and personal reforms.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:

Elected from bylaws

ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS

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

Robeen Robinson Po box 456 Clearwater, Fl 33756, President Dawn Dixon Po box 456 Clearwater, FI 33756, Vice President J. Anthony Robinson Po box 456 Clearwater, FI 33756 Treasurer Mykkel Childs Po box 456 Clearwater, Fl 33756 Secretary

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Robeen Robinson 112 N. Betty Ln Clearwater, Fl 33756

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

J. Anthony Robinson Po box 456 Clearwater, Fl 33756

************	*********
Having been named as registered agent to accept service of pre in this certificate, I am familiar with and accept the appointme	ocess for the above stated corporation at the place designate ont as registered agent and agree to act in this canacity.
	8/27/5
Signature/Registered Agent	Date
Mana	2/27/05
Segnature/Incorporator	Date