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(Requestor's Name)							
(Address)							
(Address)							
(City/State/Zip/Phone #)							
PICK-UP WAIT MAIL							
(Business Entity Name)							
(Document Number)							
Certified Copies Certificates of Status							
Special Instructions to Filing Officer:							

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SECRETARY OF STATE

ALLAHASSEF FI GRIDA

C. 2.10-12

TRANSMITTAL LETTER

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

SUBJECT:	Delivering Hands Of Praise, Inc									
Enclosed is an original and	(PROPOSED CORPORAT									
□ \$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	□\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	& Certificate							
FROM: _	Name (Pri 10101 :	india Austin nted or typed) SW 1 Street	-							
_	Plantation	Address Plantation, Florida 33324 City, State & Zip								
-	(954) 2 Daytime Tel	-								

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
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The name of the corporation shall be:

Delivering Hands Of Praise, Inc.

ARTICLE II PRINCIPAL OFFICE

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

10101 SW 1 Street Plantation, Florida 33324

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To mentor and help at risk youth in the community

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:

Appointed by the pastor

ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS

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

Shewandia Austin 10101 SW 1 Street Plantation, Florida 33324 President

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Shewandia Austin 10101 SW 1 Street Plantation, Florida 33324

ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is:

Shewandia Austin 10101 SW 1 Street Plantation, Florida 33324

Ha	ving	been	name	ed as r	egister	ed agent	to accep	ot servic	e of pro	cess fo	or the	above	stated	corpo	ration	at th	e plac	e desig	nated
in į	his j	ertifi!	çate, .	l am f	amilia	with an	i accept	the app	oointmer	nt as r	egister	red ag	zent an	d agre	e to a	et in t	his cap	pacity.	
I	- /	/	1		/	1 ,					_	-		_			_	_	

Signature/Registered Agent

Louding Mo-7-05

Date

Date

10-7-05

Signature/Incorporator

Date