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| (Re | equestor's Name) | | | |
|---|-------------------|----------------|--|--|
| (Ad | dress) | | | |
| (Ad | dress) | | | |
| (Cit | y/State/Zip/Phone | +) | | |
| PICK-UP | ☐ WAIT | MAIL | | |
| (Business Entity Name) | | | | |
| (Document Number) | | | | |
| Certified Copies | _ Certificates | of Status | | |
| Special Instructions to Filing Officer: | | | | |
| | | | | |
| | · | | | |
| | | | | |

Office Use Only



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STATE OF STATE PLONIDA

CB 8-11-06

COVER LETTER

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

| SUBJECT: Life After | er The Child Inc. | | | | | |
|---|--|------------------------------------|--------------------|--|--|--|
| (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX) | | | | | | |
| | | | | | | |
| Enclosed is an original a | and one(1) copy of the Articl | es of Incorporation and a | check for: | | | |
| ☐ \$70.00 Filing Fee | \$78.75 Filing Fee & Certificate of Status | S78.75 Filing Fee & Certified Copy | | | | |
| | | ADDITIONAL CO | PY REQUIRED | | | |
| FROM: | Reginald Jenkins/Ryar | n Davidson | _ | | | |
| | 1614 Morrell Dr. | ldress | - | | | |
| | Lakeland, FI,33805 City, St | tate & Zip | - | | | |
| | (863)-430-2869/ (954) Daytime Tel | -821-5162 ephone 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)

| | ĖĮĮ | ED | | |
|----------------------|-------------|---------------|-------------|--------|
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| SECRETARIAS TALLAHAS | iry See, | OF S , FL(| TAT DRIE | E A |

ARTICLE I NAME

The name of the corporation shall be:

Life After the Child Inc.,

ARTICLE IL PRINCIPAL OFFICE

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

1614 Morrell Dr

Lakeland, FI 33805

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Life After The Child Inc. is a non-profit organization created for charitable, educational, religious and other purposes including, but not limited to, enhancing rural, urban and immigrant communities. Through the development of community service and revitalization programs that pursue affordable housing, education, wellness, human services, economic and workforce development for low to moderate income groups.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:

"In accordance with the By-Law of the organization".

ARTICLE V INITIAL DIRECTORS AND /OR OFFICERS

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

Debra L. Wright -Director

1903 Sylvester Road

Lakeland, Florida 32303

Michelle L. Fontaine -Director

2321 Garland Court, #1

Tallahassee, Florida 32303

Dr. Stacey A. Davis -Director

3103 Honeywood Lane

Apt E

Roanoke, VA 24018

Reginald A. Jenkins -Officer

1614 Morrell Dr.

Lakeland, Florida 33805

Ryan Davidson -Officer

5449 NW 90 Ave

Sunrise, Florida 33351

Jennifer Nall -Officer

850 East Lime St.

Apt. 3

Lakeland FL 33801

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

| The name and Florida Street addres | <u>s (</u> P.O Box Not acceptable) |) of the registered agent is: |
|------------------------------------|------------------------------------|-------------------------------|
| | | |
| Donna Jenkins (Mrs.) | | |

11113 NW 37 St.

Sunrise Florida 33351

ARTICLE VII INCORPORATOR

The Name(s) and address (es) of the Incorporator is:

Reginald Jenkins

1614 Morrell Dr

Lakeland, Florida 33805

Ryan Davidson

5449 NW 90 Ave

Sunrise Florida 33351

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

Date

Signature/Incorporator

Date

Signature/Incorporator

Date