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(Requestor's Name)

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(Address)

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(Address)

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(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
2010 JUL 26 PM 4:59

7/28/10

## COVER LETTER

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

SUBJECT: Restoration Outreach Christian Kare Center, Inc.

Enclosed is an original and one (1) copy of the Certificate of Domestication and a check for:

### FEES:

|  |          |
|--|----------|
| Certificate of Domestication                 | \$50.00  |
| Articles of Incorporation and Certified Copy | \$78.75  |
| Total to domesticate and file                | \$128.75 |

### OPTIONAL:

|                       |         |
|-----------------------|---------|
| Certificate of Status | \$ 8.75 |
|-----------------------|---------|

2010 JUL 26 PM 4:59  
FL DJ  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

Alberta L. Hill  
Name (printed or typed)

314 Rachelle Avenue - #1017  
Address

Sanford, FL 32771  
City, State & Zip

347-600-3779  
Daytime Telephone Number

drhill@womenveteranstudios.org  
E-mail address: (to be used for future annual report notification)

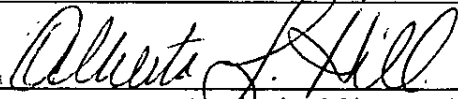
**NOT FOR PROFIT  
CERTIFICATE OF DOMESTICATION**

The undersigned, Alberta Hill, Founder, President, Chairman  
(Name) (Title)  
of Restoration Outreach Christian Kare Center, Inc. a foreign Corporation  
(Corporation Name)  
in accordance with section 617.1803, Florida Statutes, does hereby certify:

1. The date on which corporation was first formed was May 1, 2009.
2. The jurisdiction where the above named corporation was first formed, incorporated, or otherwise came into being was East Orange, New Jersey.
3. The name of the corporation immediately prior to the filing of this Certificate of Domestication was Restoration Outreach Christian Kare Center, Inc.
4. The name of the corporation, as set forth in its articles of incorporation, to be filed pursuant to s. 617.01201 and 617.0202 with this certificate is Restoration Outreach Christian Kare Center, Inc.
5. The jurisdiction that constituted the seat, siege social, or principal place of business or central administration of the corporation, or any other equivalent jurisdiction under applicable law, immediately before the filing of the Certificate of Domestication was East Orange, New Jersey
6. Attached are Florida articles of incorporation to complete the domestication requirements pursuant to s. 617.1803.

I am President, of Restoration Outreach Christian Kare Center, Inc.

and am authorized to sign this Certificate of Domestication on behalf of the corporation and have done so this the 7 day of July, 2010.

  
(Authorized Signature)

|  |                 |
|--|-----------------|
| Filing Fee:                                  |                 |
| Certificate of Domestication                 | <b>\$50.00</b>  |
| Articles of Incorporation and Certified Copy | <b>\$78.75</b>  |
| Total to domesticate and file                | <b>\$128.75</b> |

**ARTICLES OF INCORPORATION**  
In compliance with Chapter 617, F.S. (Not for Profit)

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

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**ARTICLE I NAME**

The name of the corporation shall be:

Restoration Outreach Christian Kare Center, Inc.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address shall be:

Restoration Outreach Christian Kare Center, Inc.

249 Bellagio Circle

Suite 111

Sanford, FL 32771

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized:

Church and Community Outreach. To serve homeless Veterans and Veteran families and their minor children providing housing and supportive services. To serve the elderly and frail. Children and Youth Counseling, teaching, activities to enhance and enrichment their development into adulthood.

**ARTICLE IV MANNER OF ELECTION**

The manner in which the directors are elected or appointed:

Through voting procedure set forth in our Church and Organizational Bylaws.

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

The name(s) and address(es) and specific title(s):

Alberta Hill, Founder/President/Chair 324 Rachelle Avenue - #1017, Sanford, FL 32771

James Hill, Vice President, 314 Rachelle Avenue - #1017, Sanford, FL 32771

Maston Love, Director, 204 Beethoven Road, Lexington, NC 27292

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

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

Elsa Garcia

11208 Hillwood Drive

Sanford, FL 32771

**ARTICLE VII INCORPORATOR**

The name and address of the incorporator is:

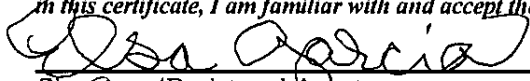
Alberta Hill

314 Rachelle Avenue -Apt 1017

Sanford, FL 32771

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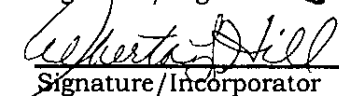
*Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity.*



Signature/Registered Agent

July 17, 2010

Date



Signature/Incorporator

July 17, 2010

Date