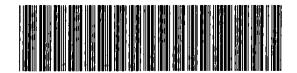
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TO ACKNOWLEDGE SUFFICIENCY OF FILING OEPARIMENT OF STATE OIVISION OF CORPORATION

FILED 19 JUL 13 PH 1:39

T Butch JUDG KIRMAN

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COVER LETTER

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

subject: And	Erson Place (PROPOSED CORPORAT	OF HODE	Out Reo	ich Center, INC.
Enclosed is an original a	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate OPY REQUIRED	
FROM:	Gloria Ang	gel Williams	am 5	
	14240 S.	N. 166 C.	<u>+</u>	
	Miam i City,	Torida 33 State & Zip	176	
	701 ~ 1		-	

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

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

The name of the corporation shall be: Anderson Place Of Hope Out Reach Center, INC
ARTICLE II PRINCIPAL OFFICE Principal street address Mailing address, if different is:
21900 S.W 120 ave 14240 SW 106 Ct Gov1ds +1a 33170 Miami Fla 33176
ARTICLE III PURPOSE The purpose for which the corporation is organized is: Reaching Out to People Young and O
Teaching Faith base, Mentoring, Feeding, Clothing, tutoring, training people to better their life until Enternal.
ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected and appointed: Nill be Stated in By laws
Name and Title: CSloria Angel Williams Name and Title: Arthur L Williams - Director Address: Director Migni Fla 33176 Name and Title: Arthur L Williams - Director Address: 14240 5.W 106 C4 Nostor Migmi Fla 33176 Director Migmi Fla 33176
Name and Title: Myra Rambo - Director Name and Title: Adriene Thomas Harrell - Director Address: 108 50 5W 54 5t 5t 5t 5t 5t 5t 5t
Name and Title: Deanous Gibson-Arabe Name and Title: Arnitris A Williams - Address: 56 Sa Wi 2nd Street Address: 14240 5.W. 106 ct apt 204 Miami Fla 33130 miami 1 33176
ARTICLE VI REGISTERED AGENT The name and Florida street address (PO Roy NOT acceptable) of the registered agent is: Name: Address: Clorid Angel Williams 21905 S. W. 120+W ave Gould Fla 33170
ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Name: Address: Goria Ange Williams 14240 S. W. 10 6 Court Miami Fla 33 17 (
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 Automotion Auto
I submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. Regulared Signature of incorporator