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(Requestor's Name)				
: (Address)				
(Address)				
(City/State/Zip/Phone #)				
(City/State/Zip/Prione #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
<u> </u>				
Special Instructions to Filing Officer:				
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12 APR 16 PM 3: 25

PS 4/17/12

COVER LETTER

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

SUBJECT: Bless my Sole Incorporated					
(PROPOSED CORPORATE NAME – <u>MUST INCLUDE SUFFIX</u>)					
Enclosed is an original	and one (1) copy of the Artic	les of Incorporation and	d a check for:		
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate		
		ADDITIONAL C	OPY REQUIRED		
FROM: Kathleen Worley					
Name (Printed or typed)					
112 Pineview Rd					
Address					
Jupiter, Florida 33469					
City, State & Zip					
561-339-6379 112 Pine Way tinge Telephone number					
worleykathleen38@gmail.com					

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

E-mail address: (to be used for future annual report notification)

ARTICLES OF INCORPORATION

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

ARTICLE I	NAME Bless My Sole Incorpora	ated
The name of the c	orporation shall be:	12 APR 16 PM 3: 25
ARTICLE II	PRINCIPAL OFFICE	72 m 11 0 11 0 20
	Principal street address	Mailing address, if different is:
	112 Pineview Rd	
	Jupiter, Florida 33469	
5.001.5 W		
RTICLE III	PURPOSE	
	which the corporation is organized is:	a a manual tru
o provide si	hoes to the homeless and needy in the	Community
RTICLE IV	MANNER OF ELECTION The manner in w	which the directors are elected and appointed:
n the future we will		by current board members. They will need a minimum of two votes to ne a board
nember. ARTICLE V	INITIAL OFFICERS AND/OR DIRECTOR	28
	itle: Kathleen Worley, President	Name and Title:
Address:	112 Pineview Rd	Address:
	Jupiter, Fl 33469	
Name and T	Fitle: Victorea Worley Vice President & founder	Name and Title:
Address:	112 Pinevew Rd	Address:
	Jupiter, FI 33469	
	· · · · · · · · · · · · · · · · · · ·	
Name and T	itle: David W. Worley, officer	Name and Title:
Address:	112 Pineview rd	Address:
	Jupiter, Fl 33469	
RTICLE VI	REGISTERED AGENT	
	prida street address (P.O. Box NOT acceptable) of t	he registered agent is:
Name:	Kathleen A. Worley	
Address:	112 Pinevew Rd	
	Jupiter, FI 33469	
RTICLE VII he name and ad	INCORPORATOR dress of the Incorporator is:	
Name:	Kathleen Worley	
Address:	112 Pineview Rd	
	Jupiter, FI 33469	•
		
		s for the above stated corporation at the place designated in thi.
rujicaje, i um ja	nmiliar with and accept the appointment as registered	a ugent and ugree to act in this capacity
CATA	LIDIA DE MARCLOIA	April 11, 2011
KV	Required Signature of Registered Agent	Date
	, , ,	
	ment and affirm that the facts stated herein are tru of State constitutes a third degree felony as provided	e. I am aware that any false information submitted in a documen d for in \$ 817.155. F.S.
Department		1 Jun 111 301 / 1120; 1 13.
Kattin	lle Worlow	April 11, 2011
	Required Signature of Incorporator	Date