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| Certified Copies | Certificates | of Status |
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| Special Instructions to F | iling Officer: | |
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Office Use Only



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COVER LETTER

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

| SUBJECT: ALF | CINA AHY | OMEG | INC. |
|-----------------------------|------------------------------|----------------------------|-------------------|
| | (PROPOSED CORPORAT | E NAME – <u>MUST INCLU</u> | DE SUFFIX) |
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| | | | |
| Enclosed is an original ar | nd one (1) copy of the Artic | cles of Incorporation and | a check for : |
| Enclosed to the original th | id one (1) copy of the firm | oles of incorporation and | THE STREET STREET |
| \$70.00 | \$78.75 | □\$78.75 | \$87.50 |
| Filing Fee | Filing Fee & | Filing Fee | Filing Fee, |
| g | Certificate of | & Certified Copy | Certified Copy |
| | Status | | & Certificate |
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| | | ADDITIONAL CO | PY REQUIRED |
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| FROM: _ | GALL D | AUIDSON | _ |
| | Name (Pri | nted or typed) | |
| | | | |

954-560-0416

Daytime Telephone number

1250 N.W. 126th Ave

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

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



FLORIDA DEPARTMENT OF STATE Division of Corporations

March 26, 2013

GAIL DAVIDSON ****3RD ML****
PO BOX 190485
LAUDERDALEHILL, FL 33319

SUBJECT: ALPHA AND AMEGA INC.

Ref. Number: W13000008815

We have received your document for ALPHA AND AMEGA INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 617.0202(d), Florida Statutes, requires the manner in which directors are elected or appointed be contained in the articles of incorporation or a statement that the method of election of directors is as stated in the bylaws.

It appears the filing submitted has a typographical error in the entity name. Please verify this name and all other information contained in the filing and resubmit it for processing.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Valerie Herring Regulatory Specialist II New Filing Section

Letter Number: 213A00003489

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

| ARTICLE I NAME The name of the corporation shall be: Alpha and AMEGA IIC ARTICLE II PRINCIPAL OFFICE Principal street address Mailing address, if different is: |
|---|
| ARTICLE II PRINCIPAL OFFICE Principal street address 1250 N.W. 126th Ave P.O. Barring address Florida SUIPRISE Florida 33303: 33319.U.S.A. 134PR-8 PM 4:50 LAUDER HUBBER FLORIDA 33319.U.S.A. 33319.U.S.A. |
| ARTICLE III PURPOSE |
| The purpose for which the corporation is organized is: To Feed, The LL |
| The purpose for which the corporation is organized is: To Feed, the Homeless, Take care of the Needy Provide basic Needs for the homeless and needy ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected and appointed: |
| ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected and appointed: AS Stated in the Bylans |
| ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS |
| Name and Title: OAV DSON Name and Title: Address: JSO UNIDAHA Address: SUNRISE ISC. 33323 |
| Name and Title: Cterard Anderson Name and Title: Address: 1387 N.W. 126th Acaddress: SUN RISE FLORIDIA 3.3323. |
| Name and Title: Everette Harvey Name and Title: Address: |
| ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: Name: Gerord Anderson Address: 1287 N W B644 Ave Sun Pise F |
| ARTICLE VII INCORPORATOR |
| The name and address of the Incorporator is: Name: Address: DAUGSON Address: 1250 N.W. 126th Ave 33323 |
| 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 |
| a Andrews Edward Toxio |
| GAnderson Required Signature of Registered Agent February 7, 2013. |
| 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. |
| Ebryary 1, 20B |
| Required Signature of Incorporator Date |