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14 APR 17 AM 11:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1114-15226

MD 4/18

COVER LETTER

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

SUBJECT: The Life Line Project, Inc.

(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)

Enclosed is an original and one (1) copy of the Articles of Incorporation and 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 COPY REQUIRED

FROM: Angela Patton

Name (Printed or typed)

6440 Metrowest Blvd Apt 407

Address

Orlando, FL 32835

City, State & Zip

407-844-6906

Daytime Telephone number

AngieT4zphib@aol.com

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 10, 2014

ANGELA PATTON
6440 METROWEST BLVD., APT.407
ORLANDO, FL 32835

SUBJECT: THE LIFE LINE PROJECT, INC.
Ref. Number: W14000015226

We have received your document for THE LIFE LINE PROJECT, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 617.0803, Florida Statutes, requires that the board of directors never have fewer than three directors.

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.

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.

Maryanne Dickey
Regulatory Specialist II
New Filing Section

Letter Number: 514A00005183

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

ARTICLE I NAME

The name of the corporation shall be: The Life Line Project, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address:
108 N. Parramore Ave

Orlando, FL 32801

Mailing address, if different is:
P.O. Box 585977

Orlando, FL 32858-5977

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TALLAHASSEE, FLORIDA

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: to help people and families in distress
by providing food assistance, clothing, and referrals to the
appropriate agencies. To empower, educate, enhance and improve
the quality of life for families in the community through counseling
and mentoring. Said corporation is organized exclusively for
charitable, religious, educational and scientific purposes.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected and appointed: Majority vote of
the officers and directors. The method of election of directors is as stated in the bylaws.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Henry White, Chairman

Address: 108 N. Parramore Ave
Orlando, FL 32801

Name and Title: Venzil Deveaux, Vice Chairman

Address: 6245 Forrest Grove Blvd.
Orlando, FL 32808

Name and Title: Angela Patton, Treasurer

Address: 6440 Metrowest Blvd Apt 407
Orlando, FL 32835

Name and Title: Gerald Bell, Director

Address: 303 Riunite Cir.
Winter Springs, FL 32708

Name and Title: Susan Corbett, Director

Address: 723 Bentley St.
Orlando, FL 32805

Name and Title: April Patterson, Director

Address: 4925 Bottlebrush Ln. Apt 9105
Orlando, FL 32808

Name and Title: David Patton Sr., Director Name and Title: _____
Address: 6440 Metrowest Blvd Apt 407 Address: _____
Orlando, FL 32835 _____

Name and Title: _____ Name and Title: _____
Address: _____ Address: _____

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TALLAHASSEE, FLORIDA

ARTICLE VI REGISTERED AGENT

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

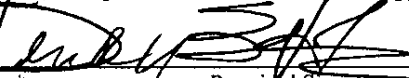
Name: Henry White
Address: 108 N. Parramore Ave
Orlando, FL 32801

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Angela Patton
Address: 6440 Metrowest Blvd Apt 407
Orlando, FL 32835

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



Required Signature of Registered Agent

4/5/2014

Date

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.



Required Signature of Incorporator

4/5/2014

Date