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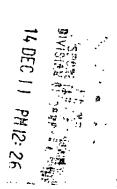
DEC 1 2 2014

T. SCOTT



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COVER LETTER

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

	ing Rivers of Life, Inc. DPOSED CORPORATE NAM	ME – <u>MUST INCLUDE S</u>	SUFFIX)
Enclosed is an original a	and one (1) copy of the Artic	cles of Incorporation a	nd 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 REQUIRE		L COPY REQUIRED
FROM:	Shayla Bulla		
	Name (Printe	ed or typed)	
	3524 NW 24	4 th Street	
	Addr		
	Lauderdale !	Lakes, FL 3331	
	City, State		
	(754) 264-2579		
•	Daytime Telep		
	Sbullard2002@yahoo.com		
Ë	-mail address: (to be used for fu		ntion)

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

ARTICLES OF INCORPORATION

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

Article I NAME

The name of the corporation shall be:

Refreshing Rivers of Life, Inc.

(EIN# 47-2288871)

Article II PRINCIPAL OFFICE

Principal Street address

Mailing address, if different is:

3524 NW 24th Street

SAME

Lauderdale Lakes, FL 33311

Article III PURPOSE

The purpose for which the corporation is organized is:

The purpose of the formation of the corporation is charitable, scientific, literary and educational within the meaning of Section 501c3 of the Internal Revenue Service Code of 1954 or the corresponding provisions of any future U.S. Internal Revenue law. Among those purposes is to offer life enhancement skills development and opportunities for successful living.

Article IV MANNER OF ELECTION The manner in which the directors are elected and appointed:

As provided in the By-Laws as outlined on page 2, Article VI Section 1.

Article V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:

Shayla Bullard, President

Address:

3524 NW 24th Street

Lauderdale Lakes, FL 33311

Name and Title:

Jermaine Bullard, Board Chair

Address:

3524 NW 24th Street

Lauderdale Lakes, FL 33311

Name and Title:

Gloria Gilbert, Secretary

Address:

3527 NW 24th Street

Lauderdale Lakes, FL 33311

Name and Title:

Katherine Agosto, Treasurer

Address:

12875 70th Place North

West Palm beach, FL 33412

Article VI REGISTERED AGENT

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

Name and Title:

Shayla Bullard

Address:

3524 NW 24th Street

Lauderdale Lakes, FL 33311

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Article VII INCORPORATOR

The name and address of the incorporator is:

Name and Title:

Shayla Bullard

Address:

3524 NW 24th Street

Lauderdale Lakes, FL 33311

Article VIII Purpose Clause

No part of the net earnings of the Corporation shall inure to the benefit of, or be distributed to its members, trustees or other private persons, except that the Corporation shall be authorized and empowered to pay reasonable compensation for services rendered and to make payments and distributions in furtherance of the purposes set forth in Article III hereof. No substantial part of the activities of the Corporation shall be the carrying on of propaganda, or otherwise attempting to influence legislation, and the Corporation shall not participate in, or intervene in (including the publishing and distribution of statements) any political campaign on behalf of or in opposition to any candidate for public office.

Article IX Dissolution of Assets

Upon the dissolution of the Corporation, assets acquired by the Corporation shall be distributed for one or more exempt purposes within the meaning of Section 501c3 of the Internal Revenue Code, or the corresponding section of any future federal tax code, or shall be distributed to the federal government, or to the state or local government, for a public purpose. Any such assets not so disposed of shall be disposed of by a Court of Competent Jurisdiction of the county in which the principle office of the Corporation is located, exclusively for such purposes or to such organization or organizations, as said Court shall determine which are organized and operated exclusively for such purposes.

Having been named as the 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 agnature of Registered Agent

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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.8.17.155, F.S.

Required Signature of Registered Agent

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