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(Cit	y/State/Zip/Phone	e #)
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Office Use Only

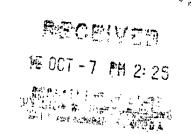


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FLORIDA DEPARTMENT OF STATE Division of Corporations

September 17, 2015

AGNOLITE FLORIAL 6727 BULRUSH CT GREENACRES, FL 33413

SUBJECT: BASIC CARE CHILDREN'S INITIATIVE INC.(BCCI)

Ref. Number: W15000061464

We have received your document for BASIC CARE CHILDREN'S INITIATIVE INC.(BCCI) and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The corporate name may not contain "Acronyms".

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 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.

Carol Mustain Regulatory Specialist II

Letter Number: 015A00019654

## **COVER LETTER**

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

SUBJECT:	E CHILDREN'S INITIATIVE I				
30b3EC1	(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)				
Enclosed is an original a	and one (1) copy of the Artic	les of Incorporation and	a check for :		
zavosova is an originar	are one (1) copy or are 1 mile	l l l l l l l l l l l l l l l l l l l			
\$70.00	<b>\$78.75</b>	<b>\$78.75</b>	<b>■</b> \$87.50		
Filing Fee	Filing Fee &	Filing Fee	Filing Fee,		
	Certificate of Status	& Certified Copy	Certified Copy & Certificate		
		ADDITIONAL CO	PY REQUIRED		
		ADDITIONAL CO	PY REQUIRED		
FROM:	AGNOLITE FLORIAL		PY REQUIRED		
FROM:		ADDITIONAL CO	PY REQUIRED		
FROM:			PY REQUIRED		
FROM:	Name		PY REQUIRED		
FROM:	Name	(Printed or typed)	PY REQUIRED		

561-577-8182

AFLORIAL1@GMAIL.COM

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

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

Daytime Telephone number

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

ARTICLE I The name of the	NAME  e corporation shall be:  BASIC CARE C	CHILDREN'S INITIA	TIVE INC.	
	PRINCIPAL OFFICE			
6727	Principal street address; BULRUSH CT		Mailing address, if different is:	
GRE	ENACRES, FL 33413			
	or which the corporation is organized is			
LIFE BY PRO	OVIDING BASIC SUPPLIES, SPONS	ORING EDUCATION	TO CHILDREN IN NEED. OUR GO.	AL IS
TO PROVIDI	E EACH CHILD WITH BASIC NECE	SSITIES AND THE L	OVE OF GOD	
			<del>, , , , , , , , , , , , , , , , , , , </del>	
	<del></del>		· · · · · · · · · · · · · · · · · · ·	•, • • . • .
<del></del>				······································
ARTICLE IV	MANNER OF ELECTION The m	nanner in which the dire	ectors are elected and appointed:	TING
ARTICLE V	INITIAL OFFICERS AND/OR DIR	<u>ECTORS</u>		
Name and Title	AGNOLITE FLORIAL	Name and Title	BRIANNA PERISSIEN	_
Address	EXECUTIVE DIRECTOR	Address:	SECRETARY	
	6727 BULRUSH CT		107 LEXINGTON DRIVE	_
	GREENACRES, FL 33413	<del></del>	ROYAL PALM BEACH, FL 33411	_
Name and Title	JANACK DEJEAN	Name and Title	PATRICIA JOSEPH	_
Address	PRESIDENT	Address:	TREASURER	_
	9353 MADEWOOD COURT		1905 19TH LANE	_
•	ROYAL PALM BEACH, 33411		GREENACRES, FL 33463	-
Name and Title	MARTIAL MARCELLUS	Name and Title		<b></b>
Address	VICE PRESIDENT	Address:	<del></del>	_
, 1414 400	318 OLIVE TREE CIR	(14410)		<del></del>
	GREENACRES, 33413	TELLOCAL STORMS		<del></del>

Name and Title		Name and Title:
Address	***************************************	Address:
	REGISTERED AGENT	
	Florida street address (P.O. Box NOT acception AGNOLITE FLORIAL)	abit) of the registered agent is:
Name:	6727 BULRUSH CT	
Address:	GREENACRES, FL 3341	3
	INCORPORATOR  address of the Incorporator is:  AGNOLITE FLORIAL	
Name:	6727 BULRUSH CT	
Address:	GREENACRES, FL 334	13
ffective date, i		. (OPTIONAL)  I cannot be more than five business days prior or 90 business days
lote: If the dat	-	olicable statutory filing requirements, this date will not be listed as the ds.
laving been no ertificate, I am	amed as registered agent to accept service of familiar with and accept the appointment as	f process for the above stated corporation at the place designated in t registered agent and agree to act in this capacity
	// // Dan 1000 -	10/04/2015
	Required Signature of Registered A	Agent Date
submit this do the Departme	cument and affirm that the facts stated hereiv nt of State constitutes a third degree felony as	n are true. I am aware that any false information submitted in a docum s provided for in s.817.155, F.S.
	Man la	10/04/2015
	Required Signature of Incorpo	orator Date

## ARTICLES OF INCORPORATION

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

ARTICLE II	PRINCIPAL OFFICE			
6727	Principal <u>street</u> address: BULRUSH CT		Mailing address, if different is:	
GRE	ENACRES, FL 33413			
The purpose for	or which the corporation is organized is: _ DVIDING BASIC SUPPLIES, SPONSOR	RING EDUCATION	TO CHILDREN IN NEED. OUR GOA	
TO PROVIDE	E EACH CHILD WITH BASIC NECESS	ITIES AND THE L	OVE OF GOD	
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ARTICLE IV	MANNER OF ELECTION The man	nner in which the dire	ctors are elected and appointed: BY VO	TING
ARTICLE IV	MANNER OF ELECTION The man	ner in which the dire	ctors are elected and appointed:	TING
ARTICLE IV	MANNER OF ELECTION The man	uner in which the dire	ctors are elected and appointed:	TING
	MANNER OF ELECTION The man		ctors are elected and appointed:	TING
ARTICLE V	INITIAL OFFICERS AND/OR DIRECT	CTORS	ctors are elected and appointed:  BRIANNA PERISSIEN	TING
ARTICLE V  Name and Title	INITIAL OFFICERS AND/OR DIRECT	CTORS  Name and Title	ctors are elected and appointed:  BRIANNA PERISSIEN	TING
ARTICLE V  Name and Title	INITIAL OFFICERS AND/OR DIREC GROOLITE FLORIAL	CTORS	BRIANNA PERISSIEN	TING
ARTICLE V  Name and Title	INITIAL OFFICERS AND/OR DIRECT AGNOLITE FLORIAL EXECUTIVE DIRECTOR	CTORS  Name and Title	BRIANNA PERISSIEN SECRETARY	TING
ARTICLE V  Name and Title  Address	INITIAL OFFICERS AND/OR DIRECT  AGNOLITE FLORIAL  EXECUTIVE DIRECTOR  6727 BULRUSH CT  GREENACRES, FL 33413  IANACK DEIFAN	CTORS  Name and Title  Address:	BRIANNA PERISSIEN  SECRETARY  107 LEXINGTON DRIVE  ROYAL PALM BEACH, FL 33411  PATRICIA IOSEPH	TING
ARTICLE V  Name and Title  Address  Name and Title	INITIAL OFFICERS AND/OR DIRECT  AGNOLITE FLORIAL  EXECUTIVE DIRECTOR  6727 BULRUSH CT  GREENACRES, FL 33413  IANACK DEIFAN	CTORS  Name and Title  Address:  Name and Title	BRIANNA PERISSIEN  SECRETARY  107 LEXINGTON DRIVE  ROYAL PALM BEACH, FL 33411  PATRICIA IOSEPH	TING
ARTICLE V  Name and Title  Address  Name and Title	AGNOLITE FLORIAL  EXECUTIVE DIRECTOR  6727 BULRUSH CT  GREENACRES, FL 33413  JANACK DEJEAN	CTORS  Name and Title  Address:	BRIANNA PERISSIEN  SECRETARY  107 LEXINGTON DRIVE  ROYAL PALM BEACH, FL 33411  PATRICIA JOSEPH	TING
ARTICLE V  Name and Title  Address  Name and Title	INITIAL OFFICERS AND/OR DIRECT  AGNOLITE FLORIAL  EXECUTIVE DIRECTOR  6727 BULRUSH CT  GREENACRES, FL 33413  JANACK DEJEAN  PRESIDENT	CTORS  Name and Title  Address:  Name and Title	BRIANNA PERISSIEN  SECRETARY  107 LEXINGTON DRIVE  ROYAL PALM BEACH, FL 33411  PATRICIA JOSEPH  TREASURER	TING
ARTICLE V  Name and Title  Address  Name and Title  Address	INITIAL OFFICERS AND/OR DIRECT  AGNOLITE FLORIAL  EXECUTIVE DIRECTOR  6727 BULRUSH CT  GREENACRES, FL 33413  JANACK DEJEAN  PRESIDENT  9353 MADEWOOD COURT  ROYAL PALM BEACH, 33411	CTORS  Name and Title Address:  Name and Title Address:	BRIANNA PERISSIEN  SECRETARY  107 LEXINGTON DRIVE  ROYAL PALM BEACH, FL 33411  PATRICIA JOSEPH  TREASURER  1905 19TH LANE  GREENACRES, FL 33463	TING
ARTICLE V  Name and Title Address  Name and Title Address	INITIAL OFFICERS AND/OR DIRECT  AGNOLITE FLORIAL  EXECUTIVE DIRECTOR  6727 BULRUSH CT  GREENACRES, FL 33413  JANACK DEJEAN  PRESIDENT  9353 MADEWOOD COURT  ROYAL PALM BEACH, 33411	CTORS  Name and Title Address:  Name and Title Address:  Name and Title Name and Title	BRIANNA PERISSIEN  SECRETARY  107 LEXINGTON DRIVE  ROYAL PALM BEACH, FL 33411  PATRICIA JOSEPH  TREASURER  1905 19TH LANE	TING
ARTICLE V  Name and Title	INITIAL OFFICERS AND/OR DIRECT  AGNOLITE FLORIAL  EXECUTIVE DIRECTOR  6727 BULRUSH CT  GREENACRES, FL 33413  JANACK DEJEAN  PRESIDENT  9353 MADEWOOD COURT  ROYAL PALM BEACH, 33411  MARTIAL MARCELLUS	CTORS  Name and Title Address:  Name and Title Address:	BRIANNA PERISSIEN  SECRETARY  107 LEXINGTON DRIVE  ROYAL PALM BEACH, FL 33411  PATRICIA JOSEPH  TREASURER  1905 19TH LANE  GREENACRES, FL 33463	TING

_	<u></u>			
Name and Title:_	1	Name and Title:		
Address		Address:		
	· · · · · · · · · · · · · · · · · · ·		<del></del>	
		•		
	<i>REGISTERED AGENT</i> orlda street address (P.O. Box NOT accept	able) of the regis	tered agent is:	
Name:	AGNOLITE FLORIAL			
Address:	6727 BULRUSH CT			
21001000	GREENACRES, FL 3341	3		
	INCORPORATOR Idress of the Incorporator is:			
The paint and bu	AGNOLITE FLORIAL			
Name:				
Address:	6727 BULRUSH CT	<del></del>		
	GREENACRES, FL 3341	3		
	EFFECTIVE DATE:			
	other than the date of filing:		(OPTIONAL)	
after the filing.)	ate is listed, the date must be specific and	cannot be mor	than five business days	prior or 90 business days
Note: If the date	inserted in this block does not meet the appl	licable statutory	filing requirements, this d	ate will not be listed as the
	tive date on the Department of State's record		ming requirements, uns ca	ne will the oe listed as are
	ned as registered agent to accept service of amiliar with and accept the appointment as i			- ~
/				)/04/2015
	Required Signature of Registered A			Date
		~		
ı submit this docu to the Departmeni	ment and affirm that the facts stated herein of State constitutes a third degree felony as	are true. I am a provided for in	ware that any false inforn s.817.155, F.S.	nation submitted in a document
/	Ill ma Da	-		)/04/2015
	Required Signature of Incorpo	rator		Date