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(City/State/Zip/Phone #)

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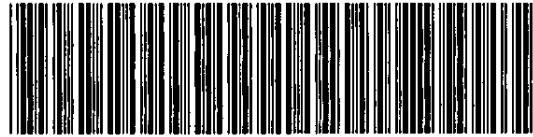
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

h 02/21/17

COVER LETTER

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

SUBJECT: ELITE ANGEL IMAGES, 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: ANTHONY K. WARD Sr.
Name (Printed or typed)

3798 ROLLINGSFORD CIRCLE
Address

LAKELAND, FL 33810
City, State & Zip

863-529-3990
Daytime Telephone number

Ward Anthony@yahoo.com
E-mail address: (to be used for future annual report notification)

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

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

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TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be: ELITE ANGEL IMAGES, INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address:

Mailing address, if different is:

3798 ROLLINGSFORD CIRCLE

LAKE LAND, FL. 33810

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: THE PURPOSE OF OUR ORGANIZATION

WILL BE TO TEACH THE ART OF PHOTOGRAPHY AND CINEMATOGRAPHY.

WE BELIEVE THAT THROUGH EDUCATION, WE CAN HELP FACILITATE
THE DIRECTION OF YOUTH WHO ARE AT RISK AND OFFER THEM
A POSITIVE OUT LOOK ON LIFE.

ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected and appointed: AFTER THIS

YEAR THE DIRECTOR WILL BE ELECTED BY THE BOARD.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: ANTHONY K. WARD^{Sr.} (DIRECTOR) Name and Title: BARRY GASTON (OFFICER)

Address 3798 ROLLINGSFORD CIRCLE Address: P.O BOX 7036
LAKE LAND, FL. 33810 WINTER HAVEN, FL.
33883

Name and Title: ABDULLAH IJAZ (OFFICER) Name and Title: ANTHONY K. WARD JR. (OFFICER)
Address 1802 W. HOUSE ST. Address: 9480 FLOWERING
PLANT CITY, FL. 33563 COTTON WOOD RD.
ORLANDO, FL. 32832

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: ANTHONY K. WARD Sr.

Address: 3798 ROLLINGSFORD CIRCLE
LAKE LAND, FL. 33810

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: ANTHONY K. WARD Sr.

Address: 3798 ROLLINGSFORD CIRCLE
LAKE LAND, FL. 33810

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

Anthony K. Ward Sr.
Required Signature of Registered Agent

2/14/17
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.

Anthony K. Ward Sr.
Required Signature of Incorporator

2/14/17
Date

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TALLAHASSEE, FLORIDA