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COVER LETTER

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

SUBJECT: Women Chosen For the Purpose of Hod Organization (PROPOSED CORPORATE NAME-MUST INCLUDE SUFFIX)

\$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 CO	PV REQUIRED

Enclosed is an original and one (1) copy of the Articles of Incorporation and a check for:

FROM: Victo Ria Lindsey

Pensacola Florida 32505

City, State & Zip

Daytime Telephone number

Lictoria Lindsey 5/6 gmail. 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)

The name of the corporation shall	oe: Women Chosen fi	or the Purpose o.	f God Diganizatio
ARTICLE II PRINCIPAL OF	<u>FICE</u>		3
Principal <u>street</u>	address: ampart Way	Mailing address, if di	
\sim	a Florida		
3250	5	1	
ARTICLE III PURPOSE The purpose for which the corpor	ation is organized is:	elp Support	Battler
Women	And Childre	·n. ond su	pport
Deople In	need, give	Spirituat Co	unling
and other			
			= = =
ARTICLE IV MANNER OF	ELECTION The manner in which t	the directors are elected and appoint	ed:
	Set forth in t	• ,	
ARTICLE V INITIAL OFFI	CERS AND/OR DIRECTORS	·	11: 56 13: 56
Name and Title: Victor	ia lind Tey Name ar	nd Title: Ramons	Hunta
	Rampart way Address		Pine (N
Preside		Directo	r-7
Four	Lder	Co	
Name and Title: Tangi	e McCanty Name ar	nd Title: Dorothy	Jaudon
/	lest Fisher Staddress	1.	•
Sect	areo	DR. Martin	King DR.
See	rctary	Directo	<u>s~</u>
Name and Title: Lola	Mills: Name as	nd Title: Callic N	loye
Address 3 Gen	tian DR. Address	s: <u>8034 //</u> /	ossy Creck
Dire	etors d	Directo	,
TRE	gsurer	Treasu	rcr_

Name and Title Healane Lewis Name and Title: DONNA POWELLA Address 2220 N. Partox St. Address: 2220 N. Partox St. Apt. 400/ Apt. 400/ Northand Curl Name and Title: Address 27/0 Deborah LN Director + Condinator ARTICLE VI REGISTERED AGENT The name and Tourida stress address (P.O. Box NOT acceptable) of the registered agent is: Name: Victoria Condinator ARTICLE VII INCORPORATOR The name and address of the incorporator is: Name: Victoria Lindsey Address: 7/6 Rampart Why Penisacola Fl 32305 ARTICLE VII INCORPORATOR The name and address of the incorporator is: Name: Victoria Lindsey Address: 7/6 Rampart Why Penisacola Fl 32305 ARTICLE VIII EFFECTIVE DATE: Effective does, if other than the date of filing: May 3 20/2 (OPTIONAL) (If an effective date is blaced, the date must be specific and cannot be more than five days prior or 90 days after the filing.) Nate: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date in the capacity of the approblement as registered agent on accept service of process for the above stated corporation at the place designated in certificute, I om familiar with and accept the appolatment as registered agent and agree to act in this capacity Victoria Levillaguage of Jegistered Agent I submit this document and affirm that the Pates stated here have fine a fune. I am aware that any false information submitted in a docum to the Department of State constitutes a third degree felony as provided for in \$817.155, F.S. When 3 20/1 Required Slignator of Incorporator				
Apt 400/ STISTANT SECRETARY & Coordinator Director + Coordinator Name and Title: Cynthia Curl Name and Title: Address 2 Address: 3 Address: 3 Address: 3 Address: 4 Address: 5 Anne Lindsey Address: 6 Anne Lindsey Address: 6 Anne Lindsey Address: 6 Anne Lindsey Address: 6 Anne Lindsey Address: 7 Address: 7 Address: 7 Anne Lindsey Address: 8 Address: 9 Address: 9 Anne Lindsey Address: 1 Anne Lindsey Andress: 1 Anne Lindsey Andress:	Name and Tit	ile: Healane Lewis Name and	Tille: Donna Pawell	
Agt 400/ Stistant Secretary & Coordinator Director + Coordinator Name and Title: Cynthia Curl Name and Title: Address Address 27/D Debarsh LN Apt B Director + Coordinator ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: Name: Director A Cincipal Cincipal Address: DICA Rampart Wity Pensacola FL 32305 ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Name: Victoria Lindsey Address: DICA Rampart Wity Pensacola FL 32305 ARTICLE VIII FEFECTIVE DATE: Effective date, if other than the date of filing: May 3 20/2 (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. Having been named as registered agent to accept service of process for the above stated corporation at the place designated incertificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity Network Signature of degistered Agent I submit this document and affirm that the patch stated herein are true. I am aware that any false information submitted in a docum to the Department of State constitutes a little degree felony as provided for in x 817.155, F.S.	• Address	2220 N Palfox St. Address:	7220 N. PalFox St	
Name and Title: Cynthia Curl Name and Title: Address 29/0 Deborah LN Apt B Director + Coordinator ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: Name: Director Acampant Way Pensoacola, Fl. 32305 ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Name: Victoria Lindsey Address: Die Rampant Way Pensoacola, Fl. 32305 ARTICLE VIII EPPECTIVE DATE: Effective date, if other than the date of filing: May 3 20/2 (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. Having been named as registered agent to accept service of process for the above stated corporation at the place designated in certificute, I am familiar with and accept the appointment as registered agent and agree to act in this capacity Action of the Department of State constitutes a third degree felony as provided for in \$877.135, F.S.		•	A	
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to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.	-	Required Signature of Registered Agent	Date	
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Required Signature of Incorporator Date	9)			10
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