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## COVER LETTER,

P. O. Box 6327
Tallahassee, FL 32314

SUBJECT: The Love Foundation for Children 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

Department of State Division of Corporations

☐ **\$**78.75

□\$78.75 Filing Fee \$87.50

Filing Fee &

& Certified Copy

Filing Fee,

Certificate of

Certified Copy & Certificate

Status

ADDITIONAL COPY REQUIRED

FROM: Steven B. Berry
Name (Printed or typed)

705 N. 31d St.

Haines City Fl 33844 City. State & Zip

843 · 377 - (p U 87

Daytime Telephone number

Steven berry 1208 & 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)

The name of the corporation shall be: The Love	Foundation for Children Inc.
ARTICLE II PRINCIPAL OFFICE	
Principal <u>street</u> address: 705 N, 3rd St	Mailing address, if different is:
Haines City FL 3384	4
for Children In is to serve with health education and foundation for children Inc.	e purpose of the Love Foundation. Children in the community i spiritual healing. The Love also feed the Community, weational literature. Support
Name and Title: Ruly Berry Director  Address 1912 Valencia Auc  Haines City FL 33844  Name and Title: Ruly Langur - Officer  Address 705 N 3rd St	Name and Title:
Name and Title:  Address	Name and Title:

Effective date, if other than the date of filing: OR 1900 (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 ling.)  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 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  Date	Name and Title:	Name and Title:			
Name and Title:  Address:	Address	Address:	<del></del>		
Name and Title:  Address:		<del> </del>	<del></del>		
Address:  Address:  Address:  Address:  Address:  Address:  Address:  Address:  ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:  Name:  Steurn B. Bring Address:  To L. 3 id 5+  Haines City FL 33844  ARTICLE VII INCORPORATOR The name and address of the Incorporator is:  Name:  Steurn B. Being Address:  ARTICLE VIII EFFECTIVE DATE:  Effective date, if other than the date of filing:  OA 14 - 3032  Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificage. In January with and accept the appointment as registered agent and agree to act in this capacity  Required Signature of Registered Agent  Date  Date					
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ARTICLE VII REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:  Name: Steuth B. Bring Address: 765 M. 3 rd 54.  Hames City FL 33844  ARTICLE VII INCORPORATOR The name and address of the Incorporator is:  Name: Steuth B. Being Address: 7c5 M. 3 rd 54.  Hames City FL 3384ii  RETICLE VIII EFFECTIVE DATE:  Effective date, if other than the date of filing: D2-14-2022 (OPTIONAL)  (If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days for 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 this certificate. In familiar with and accept the appointment as registered agent and agree to act in this capacity  Required Signature of Registered Agent  Date	Address	Address:			
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The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:  Name: Steuth B. Bring  Address: 705 N. 3rd St.  Haines City FL 33844   ARTICLE VII INCORPORATOR  The name and address of the Incorporator is:  Name: Steuch B. Berg  Address: 705 N. 3rd St.  Haines City FL 33844  ARTICLE VIII EFFECTIVE DATE:  Effective date, if other than the date of filing: 02-14-2022 (OPTIONAL)  (If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 day gater the ling.)  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 this certificate. In familiar with and accept the appointment as registered agent and agree to act in this capacity.  Required Signature of Registered Agent  Date					
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ARTICLE VII INCORPORATOR  The name and address of the Incorporator is:  Name: Steam B. Berry  Address: Jos W. 31d St.  Hairis City FL 338441  ARTICLE VIII EFFECTIVE DATE:  Effective date, if other than the date of filing: D2-14-2022 (OPTIONAL)  (If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days that 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 this certificage. The familiar with and accept the appointment as registered agent and agree to act in this capacity  Date  Date		ptable) of the registered agent is:			
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ARTICLE VIII INCORPORATOR  The name and address of the Incorporator is:  Name: Steuch B. Berry  Address: Tos B. 31d st.  Haines City FL 33844  ARTICLE VIII EFFECTIVE DATE:  Effective date, if other than the date of filing: 02-14-202 (OPTIONAL)  (If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days that 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 this certificate. In familiar with and accept the appointment as registered agent and agree to act in this capacity.  Required Signature of Registered Agent  Date	Address: 705 11 3rd St.	<del></del>			
ARTICLE VIII INCORPORATOR  The name and address of the Incorporator is:  Name: Steach B. Berry  Address: Tes L. B. Berry  Address: Tes L. B. Berry  ARTICLE VIII EFFECTIVE DATE: Effective date, if other than the date of filing: Da-14-2022 (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 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 this certificate. In familiar with and accept the appointment as registered agent and agree to act in this capacity  Required Signature of Registered Agent  Date	Hames Cat. Fl 338	<del></del> < <del>'\</del>			
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Certificate, am familiar with and accept the appointment as registered agent and agree to act in this capacity    U3- 4-2032     Required Signature of Registered Agent   Date			date will not be	listed as	the
•				lesignated	t in this
•	Stew & Burn	<u> </u>	13-14-2	<i>v</i> 22	
e e e e e e	Required Signature of Registered	Agent	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 <u>Department</u> of State constitutes a third degree felony as provided for in s.817.155, F.S.			ation submitted	in a doci	iment to
Required Stonature of Incorporator  Date  Date	Soul Dun	$\cap$	)2-14- a	Can'	_
Required Signature of Incorporator  Date	Required Signature of Incorp	porator	Date	V MU.	•