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COVER LETTER

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

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

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

ARTICLES OF INCORPORATION

In compliance with Chapter 6	17, F.S., (Not for Profit)
ARTICLE I NAME The name of the corporation shall be: Ne RCOMING	DA Struggle Inc.
ARTICLE II PRINCIPAL OFFICE	राष्ट्रित स्तर 21 PM 12: 35
Principal street address:	Mailing address, if different is: TALL AHASSEE, FL
2402 Sundance Univer	alia Surclance Drive
Monticello, Horida 32344	Montrellu, 77.32341
ARTICLE III PURPOSE	
The purpose for which the corporation is organized is:	Deganization Provides
multiple services. Serving	the Communities Covering
the Florida area . We pro	
Substance abuse Counseling	, menturing, assist with
employment For the needy. The	
Application (Credit Repair Resturc	ation and Educational Services
<u>ARTICLE IV</u> MANNER OF ELECTION The manner in which t	he directors are elected and appointed:
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS	
Name and Title ORPUT Cleveland Presidence and	dent Afear Cleveland/Sec ?
Address 2102 Sundance Drive Address:	2102 Surclarce Drive
Address 2102 Sundance Drive Address: Manticello, Hunich 323111 Name and Title: ACCUPLINE Confenter Name an Address 2102 Sundance Daive Address:	Montrello Africa
32311 20	andent
Name and Title: ACLULINE CARPENTER Name an	dident Dovoni Carpenten Seci J
Address 202 Sundance Daive Address:	262 Sindance Drive
Montredlo, Raida	Morticello, Hirida
32314 60	
Name and Title: Cameron Corpentol Name an	d Title:
Address 202 Sundance Dive, Address:	
Monticello Harida	
32344	

Name and Title:	Name and Title:	
, Address	Address:	
Name and Title:	Name and Title:	
Address	Address:	
ARTICLE VI REGISTERED AGE	NT	
	P.O. Box NOT acceptable) of the registered agent is:	25
Name: JACQUOIT	re Carpentel	727
Address: 262 Sur Montrello	Hunich 3341	AR 21 P
ARTICLE VII INCORPORATOR The name and address of the Incorpora	Δ Ι σ	PHIZE 35 OF STATE SSEE, FL
Name: JACQUELIA	ie largerter	m S
Address: 202 Sur Monticella	rance Drive , Hurica 3344	
ARTICLE VIII EFFECTIVE DATE Effective date, if other than the date of (If an effective date is listed, the date		or 90 days after the filing.)
Note: If the date inserted in this block document's effective date on the Department	does not meet the applicable statutory filing requirements, the timent of State's records.	ais date will not be listed as the
	nt to accept service of process for the above stated corporate pt the appointment as registered agent and agree to act in this	
$A \supset P$	gnature of Registered Agent	03/2//32
	the facts stated herein are true. I am aware that any false info. ird degree felony as propided for in s.817.155, F.S. CAN LETTE	rmation submitted in a document to
Require	ed Signature of Incorporator	Date