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(Requestor's Name)

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PICK-UP WAIT MAIL

(Business Entity Name)

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COVER LETTER

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

SUBJECT: The Temple of Love 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: coralie carrier-clerambault
Name (Printed or typed)

3811 NW 177th Ave
Address

Gainesville, FL 32609
City, State & Zip

3473352733
Daytime Telephone number

sarama22@pm.mc
E-mail address: (to be used for future annual report notification)

15:21:54

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

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

ARTICLE I NAME

The name of the corporation shall be: The Temple of Love Inc.

ARTICLE II PRINCIPAL OFFICE

Principal **street** address:
3811 NW 177th Ave
Gainesville, FL 32609

Mailing address, if different is:
7711 NW 156th Ave
Alachua, FL 32615

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: to create a container of harmony and peace, based on the frequency of Love.
This organization will encourage unity and peace through different activities taking place.

ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected and appointed: N/A

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: _____	Name and Title: _____
Address _____	Address: _____
_____	_____
_____	_____

Name and Title: _____	Name and Title: _____
Address _____	Address: _____
_____	_____
_____	_____

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: Coralie Carrier-Clerambault

Address: 3811 NW 177th Ave

Gainsville, FL 32609

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: Coralie Carrier-Clerambault

Address: 3811 NW 177th Ave

Gainsville, FL 32609

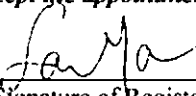
ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: September 6th 2023. (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.)

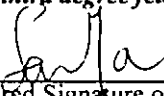
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in 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

september 6th 2023
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.


Required Signature of Incorporator

september 6th 2023
Date