TRANSMITTAL LETTER

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

Tallahassee, FL 32314				
subject:Rlu		Ministries The COPPE rate name - must include suffi	orate of ?	FILED 99 MAR 31 PM 12: 07
Enclosed is an original a	nd one(1) copy of the artic	eles of incorporation and a	check for:	
☐ \$70.00 Filing Fee	Filing Fee & Certificate of Status	□\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate	
		ADDITIONAL COPY REQUIRED		

FROM: Reach Out And Touch Ministries Thus	rporation
Name (Printed or typed)	4
LISA GIBBONS	
262 Irollie Iones April	
Address	—
LISA GIBBONSGAVE	/
ITHORIZATION BY PHONE TO DAY SIA 32211 City, State & Zip	10//
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Author to the transfer of the second	19 1/1/
DRRECT AICHE TOP ADUL OULL COOL	0/16/1
794-800	01 0171
Daytime Telephone number	1.71 31
VKT	Very "
NOTE: Please provide the original and one copy of the articles.	6/11
1401 E. I lease provide the drightal and one copy of the articles.	۲.

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida, MAR 31 Not for Profit Corporation Act, hereby adopt(s) the following Articles of Incorporation: SECRETARY OF STATE ARTICLE I NAME The name of the corporation shall be: Touch Ministries Incorporated ARTICLE II PRINCIPAL OFFICE The principal place of business and mailing address of this corporation shall be: Trollie lone Apt 1 The specific purpose(s) for which the corporation is organized is(are): souls and the commonita MANNER OF ELECTION OF DIRECTORS The manner in which the directors are elected or appointed is: THE DIRECTORS SHAC INITIAL REGISTERED AGENT AND STREET ADDRESS The name and Florida street address of the initial registered agent are: LISA GIBBONS LAWE, APT 7 JACKSONUILLE, of the Incorporator to these Articles of Incorporation are: Signature/Incorporator (An additional article must be added if an effective date is requested.)

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Signature/Registered Agent

Pate

FILED