TRANSMITTAL LETTER

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

000002937400--6 -07/21/99--01042--001 *****79.00 *****79.00

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

\$87.50

Filing Fee,

& Certified Copy Certified Copy

& Certificate

ADDITIONAL COPY REQUIRED

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

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Not for Profit Corporation Act, hereby adopt(s) the following Articles of Incorporation:

ARTICLE I

The name of the corporation shall be:

LOVE AT WORK RESCUE MISSION FOR THE HOMELESS INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be: 104- LEDWITH AVE. /P.O. BOX 1146

HAINES CITY, FL 33845-1146

ARTICLE III PURPOSE(S)

The specific purpose(s) for which the corporation is organized is(are):

RELIGIOUS :

ARTICLE IV MANNER OF ELECTION OF DIRECTORS

The manner in which the directors are elected or appointed is:

PROVIDED IN BYLAWS

ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

BETTYE WILSON

1098 Valencia Ave.

HAINES CITY, FL 33844

ARTICLE VI INCORPORATOR

The name and address of the Incorporator to these Articles of Incorporation are:

BETTYE WILSON

1098 Valencia Ave.

HAINES CITY, FL 33844

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

7-20-44 Date