

Department Of State
Division Of Corporation
P.O. Box 6327
Tallahassee, Florida 32314

PO0000019685

SUBJECT:

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

() \$122.50
Filing Fee &
Certificate Copy

() \$131.25
Filing Fee,
Certified
Copy &
Certificate

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

00 FEB 24 PM 2:59

FILED

FROM: *stanley D. Knight*
ADDRESS: *466 2 2nd ave.*
CITY, STATE & ZIP: *Jax. FL 32208*
DAYTIME TELEPHONE NUMBER: *904-967-5326 Pager*

Stanley GAVE
AUTHORIZATION BY PHONE TO
CORRECT *Supp*
DATE *2-24-00*
DOC. EXAM *EV*

400003146434--6
-02/24/00--01022--007
****200.00 ****85.75

W 5138

R. VARNADORE FEB 24 2000

ARTICLES OF INCORPORATION

The undersigned incorporator (s), for the purpose of forming a corporation under the Florida Business corporation Act, hereby adopt (s) the following Articles of incorporation.

ARTICLE I NAME

The name of the corporation shall be:

New Birth Youth Center, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

*8662 2nd avenue
Jacksonville FL 32208*

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is :

1000

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is :

*Stanley D. Right
8662 2nd avenue
Jacksonville FL 32208*

ARTICLE V INCORPORATOR(S)

The name (s) and street address(es) of the incorporator (s) to these Articles of Incorporation is (are):

*Stanley D. Right
8662 2nd avenue
Jacksonville FL 32208*

The undersigned incorporator(s) has (have) executed these Articles of Incorporation this day of

2/19/2000

(An additional article must be added if an effective date is requested.)

Signature : *Stanley D. Right*

Signature : _____

Signature : _____

Signature : _____

Signature : _____

NORTARIZATION IS NOT REQUIRED

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**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

**PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE
UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF
FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED
OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.**

1. The name of the corporation is : *New Birth Youth Center*
2. The name and address of the registered agent and office is :

Name : *New Birth Youth Center*
ADDRESS: *5662 2nd avenue*
CITY/STATE/ZIP: *JACKSONVILLE FL. 32208*

Having been named as registered agent 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 : *Stanley P. Holt*

Date: *2/19/2000*

DIVISION OF CORPORATION, P.O. BOX 6327, TALLAHASSEE, FL 32314

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