P0500012727

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

Office Use Only



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04/29/05--01010--025 **78.75

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SECRETARY OF STATE
TAIL AHASSPE, FLORIDA

9/16/05 BUK WOS-22292

TRANSMITTAL LETTER

Department of State Division of Corporat P. O. Box 6327 Tallahassee, FL 323	·	· · · · · · · · · · · · · · · ·	
SUBJECT:	(PROPOSED CORPORAT	E NAME - MUST INCL	Project
Enclosed are an orig \$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	es of incorporation and \$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status
FROM:	<u>90 j</u>	Fimilated or typed) SOX 4026 Taress FL Acc & Zip 302 or	25 33140 276

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



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

May 3, 2005

MARY G. PIMIENTA P.O. BOX 402625 MIAMI BEACH, FL 33140

SUBJECT: THE LIFE PROJECT Ref. Number: W05000022292

We have received your document for THE LIFE PROJECT and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The corporate name must contain a suffix that will clearly indicate that it is a corporation. Such suffixes include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

You must list the corporation's principal office and/or a mailing address in the cocument.

The document must contain a registered agent with a Florida street address and a signed statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6840.

Bruce W Kitchens Document Specialist New Filings Section

Letter Number: 505A00031463

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9145

and fout of town with ours!!

* ARTICLES OF INCORPORATION	
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit) FILE	מ
A TOMBOT TO V STATES	
The name of the corporation shall be:	
THE LIFE Project duc SECRETARY TALLAHASSE	OF STATE E, FLORIDA
ARTICLE II PRINCIPAL OFFICE	
The principal place of business/mailing address is: 8255 NE 8 C+.	Miomi, 33138
Mismi, FL or P.O. Box 402625,	MB FL3140
ARTICLE III PURPOSE	
The purpose for which the corporation is organized is: documentarias, social impact v	ided 5 + conferences
ARTICLE IV SHARES	•
The number of shares of stock is:	
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS	
List name(s), address(es) and specific title(s):	OP .
List name(s), address(es) and specific title(s): PRESIDENT, MARLY G. Pinnienta PO BOX 402624 MB FL 33140	8251 NE 814ct. Miami, FL33138
ARTICLE VI REGISTERED AGENT	
The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is	
MIAMINE 8th ctMARY G	. Pimienta
ARTICLE VII INCORPORATOR	
The name and address of the Incorporator is: Pinienta	
POBOX 402625	
MB FC 33140	******
Having been named as registered agent to accept service of process for the above stated corporation at the certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity	place designated in this
	58.01
Signature/Registered Agent	ate
	-58.07
Signature/Incorporator D	ate