

P8788888/6184

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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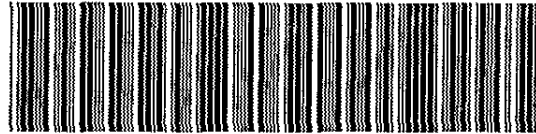
(Business Entity Name)

(Document Number)

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WC

## COVER LETTER

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

SUBJECT: Caring Hearts of Boca Raton, Inc.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are 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 of  
Status

**ADDITIONAL COPY REQUIRED**

FROM: Elcune Thelisma  
Name (Printed or typed)

2508 West Oakland Park  
Address

Fort. Lauderdale, Florida. 33311  
City, State & Zip

(954) 523-8477  
Daytime Telephone number

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

# ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

## ARTICLE I NAME

The name of the corporation shall be:

Caring Hearts of Boca Raton, Inc.

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

2508 West Oakland Park  
Fort Lauderdale, FL. 33311

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Non-Medical Homemaker/Companion Agency

## ARTICLE IV SHARES

The number of shares of stock is:

100

## ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

Elcune Thelisma (President)  
2508 West Oakland Park  
Fort Lauderdale, FL. 33311

Mathias Honore (Vice-President)  
2508 West Oakland Park  
Fort Lauderdale, FL. 33311

## ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Elcune Thelisma  
2508 West Oakland Park  
Fort Lauderdale, FL. 33311

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Elcune Thelisma  
2508 West Oakland Park  
Fort Lauderdale, FL. 33311

\*\*\*\*\*

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

✓ Mathias Honore  
Signature/Registered Agent

✓ 1-22-07  
Date

✓ Elcune Thelisma  
Signature/Incorporator

✓ 1-22-07  
Date

SECRETARY OF STATE  
FILED

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FILED

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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

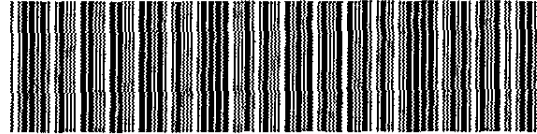
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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2-6-07  
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## COVER LETTER

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

SUBJECT: SOULWINNERS INTERNATIONAL INC.  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00      ☐ \$78.75  
Filing Fee      Filing Fee  
                    & Certificate of Status

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input checked="" type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED	

FROM: HUBERT A. LEOW  
Name (Printed or typed)

149 PLANTATION BLVD.  
Address

LAKE WORTH, FLORIDA 33467  
City, State & Zip

(561) 370-9145 or (561) 868-5817  
Daytime Telephone number

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

## Articles of Incorporation

In Compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

### ARTICLE I NAME:

The name of the corporation shall be: *Soulwinners International Inc.*

### ARTICLE II PRINCIPAL OFFICE:

The principal place of business / mailing address is: *149 Plantation Blvd., Lake Worth, Florida 33467*

### ARTICLE III PURPOSE:

The purpose for which the corporation is organized is: *Promoting teachings and training seminars, and audio / visual materials on Biblical principles of Intercessory Soulwinning and Evangelism.*

### ARTICLE IV SHARES:

The number of shares of stock is: *Seven (7) shares @ one (\$1.00) dollar per share*

### ARTICLE V INITIAL OFFICERS AND /OR DIRECTORS:

List name(s), address(es) and specific title(s):

*Hubert A. Leow - 149 Plantation Blvd. Lake Worth, Florida 33467 - President*

### ARTICLE VI INTIAL REGISTERED AGENT AND STREET ADDRESS:

The name and Florida street address (P.O.Box NOT acceptable) of the registered agent is:  
*Hubert A. Leow - 149 Plantation Blvd. Lake Worth, Florida 33467*

### ARTICLE VII INCORPORATOR:

The name and address of the Incorporator is:

*Hubert A. Leow - 149 Plantation Blvd. Lake Worth, Florida 33467*

\*\*\*\*\*

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.

*Hubert A. Leow*  
Hubert A. Leow  
Signature / Registered Agent

Date: *JAN 31, 2007*

*Hubert A. Leow*  
Hubert A. Leow  
Signature / Incorporator

Date: *JAN 31, 2007*

FILED  
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA