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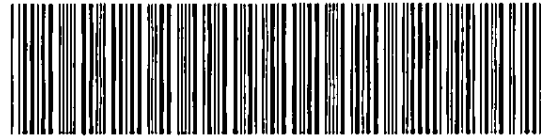
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JAN 27 2020

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DATE: 1/24/20

NAME: LA CORE CHRISTIAN HOLDINGS, INC.

TYPE OF FILING: ARTICLES

COST: 78.75

RETURN: PLAIN COPY AND GOOD STANDING PLEASE

ACCOUNT: FCA000000015

AUTHORIZATION: ABBIE/PAUL HODGE

A Hodge

COVER LETTER

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

SUBJECT: LA CORE CHRISTIAN HOLDINGS, 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

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status
ADDITIONAL COPY REQUIRED

FROM: RUSSELL R. WILLIAMS
Name (Printed or typed)

122 ARLINGTON ROAD NORTH
Address

JACKSONVILLE, FLORIDA 32211
City, State & Zip

(904) 881-1924
Daytime Telephone number

bealeaf@yahoo.com
E-mail address: (to be used for future annual report notification)

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: LA CORE CHRISTIAN HOLDINGS, INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

122 Arlington Road North
Jacksonville, FL 32211

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: All lawful activity or business
permitted under the laws of the United States and State of Florida.

ARTICLE IV SHARES

The number of shares of stock is: ONE HUNDRED (100)

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Joyce D. Williams, Pres

Name and Title: _____

Address 122 Arlington Rd. N.

Address: _____

Jacksonville, FL 32211

Name and Title: Russell R. Williams, VP

Name and Title: _____

Address 122 Arlington Rd. N.

Address: _____

Jacksonville, FL 32211

Name and Title: Perrier Dominic Williams, Treas

Name and Title: _____

Address 122 Arlington Rd. N.

Address: _____

Jacksonville, FL 32211

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TALLAHASSEE, FLORIDA

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: RUSSELL R. WILLIAMS

Address: 122 ARLINGTON RD. N.

JACKSONVILLE, FL 32211

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: RUSSELL R. WILLIAMS

Address: 122 ARLINGTON ROAD NORTH

JACKSONVILLE, FL 32211

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

Required Signature/Registered Agent

1/23/20
Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Required Signature/Incorporator

Date

1/23/20