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

ARTICLE 1 NAME The name of the corporation shall be:	A Child Incorporated
ARTICLE II PRINCIPAL OFFICE 6003 NW 201 Taxace Macani ale 25 Ti	Mailing address, if different is:
Mami Lakes FL	Same
33015	
ARTICLE III PURPOSE The purpose for which the corporation is organized is:	eteach Children how
to make right choice	s how to recognize and
follow the correct paths are many traps and Snaves	in life, because there
are many traps and Snaves	s along life's journey. People
who are Successful develo	pe wise Choin Strategies
to avoid the traps and Sna	res and put into practice the
right Chain from Chidhoo	al to old age. Frererbs 22:5
ARTICLE IV SHARES The number of shares of stock is:	
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS	
Name and Title: Dr. Adma T. Knight Dr. Adma T. Knight Address Address	Name and Title:
Address GCTC3 NW 201 Terc	Address:
Mami Lakes, Fl	
33015	
Name and Title:	Name and Title:
Address	Address:
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	/ -
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Name and Title:	Name and Title:
Address	Address:

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: Dr. Alma T. Knight, Ph. Address: 603 NW 201 Terra a Manu Lakes, FL	
Address: 603 NW 201 Terra a	<u>-</u>
Manu Lakes, FL	<u> </u>
ARTICLE VII INCORPORATOR	
The <u>name and address</u> of the Incorporator is:	
Name: Dr. Alma T. Knight Address: 6003 NW 2017	JPhD
Address: 6003 NW 2017	
Mani Lakes, F	<u>L</u> 3205
ARTICLE VIII EFFECTIVE DATE: 04/2-1	(OPTIONAL)
Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and came	not be more than five days prior or 90 days after the
filing.)	c. Cu
<u>Note:</u> If the date inserted in this block does not meet the applicab the document's effective date on the Department of State's record	
Having been named as registered agent to accept service of process certificate, I am familiar with and accept the appointment as regist	for the above stated corporation at the place designated in this ered agent and agree to act in this capacity
Required Signature/Registered Agent	04/20/2024
• ,	
I submit this document and affirm that the facts stated herein ar document to the Department of State constitutes a third degree felo	
alme T. Ky	04/20/2024
Required Signature/Incorporator	Date //