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GEORGE B. WALLACE, ESQ., P.A.

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413 W. FIRST STREET
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October 30, 1998

Department of State
Division of Corporations
Post Office Box 6327
Tallahassee, Florida 32314

900002678199--6 -11/02/98--01118--001 *****78.75 ******78.75

Re: Articles of Incorporation of WOMEN HELPING OTHERS, INC.

Dear Clerk:

Enclosed please find my client's check in the amount of \$78.75 covering the filing fee for the enclosed Articles of Incorporation. The amounts are broken down as follows:

1. \$35.00 Designating Registered Agent

2. \$35,00 Filing Fee for Articles of Incorporation

3. \$ 8.75 Certified copy of Articles of Incorporation.

I would appreciate your filing the enclosed Articles of Incorporation and returning a certified copy of the same to this office at your earliest convenience. A return envelope is also enclosed.

If you have any questions concerning this matter please do not hesitate to contact me.

Very truly yours,

GEORGE B. WALLACE, ESQ., P.A.

-George B. Wallace, Esquire

GBW/ddl

Enclosures

cc. Angelia Fowler

CORFIARY OF SUSSION OF CORFUE

F. Purintun WOV - 3 1998



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

November 3, 1998

GEORGE B. WALLACE, ESQ., P.A. 413 W. FIRST STREET SANFORD, FL 32771

SUBJECT: WOMEN HELPING OTHERS, INC.

Ref. Number: W98000024838

We have received your document for WOMEN HELPING OTHERS, INC. 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 name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with a notarized affidavit stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

Simply adding "of Florida" or "Florida" to the end of a name is not acceptable.

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) 487-6929.

Randall Purintun Document Specialist

Letter Number: 198A00053524

ARTICLES OF INCORPORATION

The undersigned incorporator for the purpose of forming a corporation under the Florida Not for Profit Corporation Act, hereby adopt(s) the following Articles of Incorporation:

ARTICLE I-NAME

The name of the corporation shall be:

WOMEN HELPING OTHERS OF CENTRAL FLORIDA .INC.

ARTICLE II - PRINCIPAL OFFICE

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

Street address: _

103 W. Commercial St., Sanford, Florida 32771

Mailing Address: Post Office Box 1766, Sanford, Florida 32771

ARTICLE III - PURPOSE

The specific purpose(s) for which the corporation is organized is(are):

To promote charitable and civic activities of its members for the betterment of those less fortunate.

ARTICLE IV - MANNER OF ELECTION OF DIRECTORS

The manner in which the directors are elected or appointed is:

As provided in the By-Laws of said corporation.

ARTICLE V - INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

Angelia Fowler

103 W. Commercial Street, Sanford, Florida 32771

ARTICLE VI - INCORPORATOR

The name and address of the Incorporator to these Articles of Incorporation are:

Angelia Fowler - 103 W. Commercial Street, Sanford, Florida 32771

Signature/Incorporator

Date

Having been named as registered agent and 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.

Signéture/Registèred Agent

Date