

N0400010955

(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



300042485603

11/09/04--01009--002 **87.50

04 NOV 12 PM 2:23
STATE
TALLAHASSEE FLORIDA

RECEIVED

js

1091-11331

TRANSMITTAL LETTER

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

SUBJECT: STRONG TOWER Ministries Inc.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is 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

ADDITIONAL COPY REQUIRED

FROM: SHORONKE K. Miller
Name (Printed or typed)

4771 100 Way North apt 101
Address

Madonia Beach, Florida 33708
City, State & Zip

(427) 397-0154
Daytime Telephone number

DEPT OF STATE
TALLAHASSEE, FLORIDA
04/10/02 PM 2:23

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

ARTICLES OF INCORPORATION

In Compliance with Chapter 617, F.S., (Not for Profit)

ARTICLE I NAME

The name of the corporation shall be:

STRONG TOWER Center of Deliverance Ministries Inc.

ARTICLE II PRINCIPAL OFFICE

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

4771 100 Way North Suite 101 Madeira Beach, FL 33708
P.O. Box 86663 Madeira Beach, FL 33708

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: (Church)

Which will be used for worship services, Bible Study + Sunday School classes
Teaching + Preaching the Gospel of Jesus

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed: where there are three or more in one place (Elected) Board members will explain the General Rules @ government of Strong Tower Ministries INC. and Nominate the desired members.

ARTICLE V INITIAL DIRECTORS/OFFICERS

The name(s), address(es) and title(s):

Director - Elder Abram Miller - President/Chairman 4771 100 way N apt 101 Madeira Beach FL 33708
Director - Evangelist Shuwanne Miller administration/Secretary 4771 100 way N apt 101 Madeira Beach, FL 33708
Director - Sis Shuwanne L Miller Treasurer 2209 63rd Avenue South apt 317 33708

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the registered agent is:

Shuwanne K Miller 4771 100 way N apt 101 Madeira Beach FL 33708

DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

04 NOV 22 PM 2:23

11:51

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Shuwanne K. Miller 4771 100 way N apt 101 Madeira Beach FL 33708

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.

Shuwanne K. Miller
Signature/Registered Agent

11/04/04
Date

Shuwanne K. Miller
Signature/Incorporator

11/04/04
Date