# 

(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



000082269380

12/11/06--01014--006 \*\*78.75

SECRETARY OF STALL BIVISION OF CORPORATIONS

1/H

# **COVER LETTER**

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314		· ·	•	
SUBJECT: Kingdom	Restoration Ministry (PROPOSED CORPORATE	y International, Ind ENAME - <u>MUST INCLU</u>	C. DE SUFFIX)	
Enclosed is an original an	d one(1) copy of the Article	es 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 CO	PY REQUIRED	
FROM: _	Gilbert Cuffy Name (Printed or typed)			
-	1485 N.W. 193 rd Terrace Address			
-	Miami, Florida 33169 City, State & Zip  (305) 319-0156 Daytime Telephone number			
-				

## ARTICLES OF INCORPORATION

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

ARTICLE I	NA	ME
-----------	----	----

The name of the corporation shall be:

Kingdom Restoration ministry International Inc.

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

06 DEC 11 PM 4: 40

# ARTICLE II PRINCIPAL OFFICE

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

655 N.W. 125th Street Miami, Florida 33161 (Place of business)

P.O. Box 694482 Miami Florida 33269 (Mailing Address)

# ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

The corporation is organized for teaching, preaching, worship and to plan and implement community programs

### ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:

Stated in by auss

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

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

Patricia Joseph, Director Noel Bannis, Director Leroy Dangler, Director

### ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Gilbert Cuffy 1485 N.W. 193 rd Terrace Miami, Florida 33169

### ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is:

Gilbert Cuffy 1485 N.W. 193 rd Terrace Miami, Florida 33169

**************************************	**************************************
in this certificate, I am familyly with and accept the appointme	ent as registered agent and agree to act in this capacity.
Out 1	12-6-2006
Signature/Registered Actor	Date
(WH)	12-6-0008
Signature/Incorporator	Date