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## **COVER LETTER**

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

SUBJECT: LOOK UP AND LIVE "HEALING & DELIVERANCE MINISTRIES, INC.

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	887.50 Filing Fee, Certified Copy & Certificate	
		ADDITIONAL C	OPY REQUIRED	
FROM:	ELAINE PRIDGER	J-WILLIAMS ited or typed)	ALC	2010
	2742 RIVER TRA	CE CIRCLE	FT).~	2010 DEC 13
	BRADENTON, FL	34208 ate & Zip	- FLORID	PH 12: 34
	941 - 536 - 358 Daytime Tele	82 ephone number		t.

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

FAVORED WMNDFGOD YAHOO. COM E-mail address: (to be used for future annual report notification)

## ARTICLES OF INCORPORATION

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

NAME THE LOOK UP AND LIVE "HEALING & DELIVERANCE HINISTRIES, INC. The name of the corporation shall be: ARTICLE II PRINCIPAL OFFICE Principal street address 2742 RIVER TRACE (URCLE BRADENTON, FL.34208-7446 Mailing address, if different is: **PURPOSE** ARTICLE III The purpose for which the corporation is organized is: CHURCH MISSION/MINISTRY NOT- FOR-PROFIT MANNER OF ELECTION The manner in which the directors are elected and appointed: VOTING PROCESS; WHEREIN THE MAJORITY RULES! ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS Name and Title: Elding PRIDGEN-FRES. Name and Title: Address: 2142 RIVER THRUE CIRCLE Address: BRANEATON, FL 34208-7446 Name and Title: TAUL HOOKE TR. - SENIOR V. RES Name and Title: 1040A EAST 233RD STREET Address: Address: BROWX NEWYORK 10466 BURRISON - V. PRES. Name and Title: Name and Title: Address: REGISTERED AGENT ARTICLE VI The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: Name: Address: 42 RIVER TRAC ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Name: Address: 142 RIVER TRACE CINCLE BRADENTON FL 34208-7446 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 12-8-10 Date Required Signature of Registered Agent I submit this document and affirm that the facts stated herein are true. I am aware that any 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.

> 12-8-10 Date

Required Signature of Incorporator