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SECRETARY OF STATE  
TALLAHASSEE FLORIDA

## COVER LETTER

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

**SUBJECT:** RHEMA PNEUMA BIBLE INSTITUTE, 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:** ERNST DOMINIQUE

\_\_\_\_\_  
Name (Printed or typed)

2240 SW 67th Terrace

\_\_\_\_\_  
Address

Miramar, FL 33023

\_\_\_\_\_  
City, State & Zip

(954) 290-8609

\_\_\_\_\_  
Daytime Telephone number

info@rhemapneumabibleinstitute.com

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

**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: RHEMA PNEUMA BIBLE INSTITUTE, INC.

**FILED**

**ARTICLE II PRINCIPAL OFFICE**

Principal street address:

Mailing address, if different is:

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TALLAHASSEE, FLORIDA

20322 NW 2nd Avenue

2240 SW 67th Terrace

Miami, FL 33169

Miramar, FL 33023

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

The corporation is organized to provide classes and seminars to train students and to acquire knowledge of the Bible in order to become ministry leaders and to properly serve and help their community.

**ARTICLE IV MANNER OF ELECTION** The manner in which the directors are elected and appointed: By unanimous vote

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

Name and Title: Raymonde Dominique President/Director

Name and Title: Dolson Fleurant Director

Address: 2240 SW 67th Terrace

Address: 361 NW 57th Street

Miramar, FL 33023

Miami, FL 33137

Name and Title: Ritha Bocaille Secretary/Director

Name and Title: Rudna C Desroches Treasurer/Director

Address: 19241 NW 23rd Street

Address: 19221 NE 10th Avenue Apt 520

Miami, FL 33056

Miami, FL 33179

Name and Title: Miralda Gilles Director

Name and Title: \_\_\_\_\_

Address: 7644 Grand View Boulevard Director

Address: \_\_\_\_\_

Miramar, FL 33023

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_ Address: \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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: Ernst Dominique  
Address: 2240 SW 67th terrace  
Miramar, FL 33023

**ARTICLE VII INCORPORATOR**

The **name and address** of the Incorporator is:

Name: Ernst Dominique  
Address: 2240 SW 67th Terrace  
miramar, FL 33023


**ARTICLE VIII EFFECTIVE DATE:** 09/01/2016

Effective date, if other than the date of filing: \_\_\_\_\_ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

*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*

  
Required Signature of Registered Agent

8/1/2016  
Date

*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.*

  
Required Signature of Incorporator

8/1/2016  
Date