

# N00008007769

## TRANSMITTAL LETTER

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

FILED  
00 NOV 22 AM 9:44  
SECRETARY OF STATE  
TALLAHASSEE, FL 32314

SUBJECT: End Time Deliverance Restoration Ministries, Inc  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

300003473899--8  
-11/22/00--01028--001  
\*\*\*\*\*87.50 \*\*\*\*\*87.50

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: Betty Grant Hill  
Name (Printed or typed)

P.O. Box 0850  
Address

Waverly FL 33877  
City, State & Zip

1-863-302-632-1324  
Daytime Telephone number

RECEIVED  
00 NOV 22 AM 9:27  
DIVISION OF CORPORATION

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

11-22  
2000

# ARTICLES OF INCORPORATION

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

## ARTICLE I NAME

The name of the corporation shall be:

EndTime Deliverance Restoration Ministries, Inc

## ARTICLE II PRINCIPAL OFFICE

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

40 West Park Ave  
Lake Wales, FLA, 33853

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Preaching & Ministering to the lost  
and Tending to the Need of the  
People.

## ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:

As Stated in By laws

## ARTICLE V INITIAL DIRECTORS/OFFICERS

The name and addresses:

Kaneishia Watson  
1080 State Rd 60 E  
Lake Wales, FLA 33853

Pamela Cohen  
3621 Wipacomb St  
Palm Bay, FLA 32909

Charlie Mae Daurie  
570 Murphy Rd  
Haines City FL 33844

## ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Betty Grant Hill  
1296 Center St  
Waverly FLA 33877

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Betty Grant Hill  
P.O. Box 2850  
Waverly FLA 33877

\*\*\*\*\*  
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.

Betty Grant Hill  
Signature/Registered Agent

11/22/00  
Date

Betty Grant Hill  
Signature/Incorporator

11/29/00  
Date

FILED  
00 NOV 22 AM 9:44  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE