

Nd000007117

TRANSMITTAL LETTER

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

300004624413--0
-10/05/01--01021--004
*****78.75 *****78.75

SUBJECT: Faith and Deliverance House of Miracles, 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: Benjamin Perry
Name (Printed or typed)

777 Avalon Street
Address

Lake City, FL 32055
City, State & Zip

(386) 755-4028
Daytime Telephone number

01 OCT -5 AM 11:26
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

08/10/8

**ARTICLES OF INCORPORATION OF FAITH AND DELIVERANCE
HOUSE OF MIRACLES INC.**

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

ARTICLE I NAME

The name of the corporation shall be:
Faith and Deliverance House of Miracles, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:
600 Long Street
Lake City, FL 32025

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
The operation of a church, and church related activities.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:
The directors are elected by a democratic vote of the congregation of the church.

ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the registered agent is:
Benjamin Perry
777 Avalon Street
Lake City, FL 32055

ARTICLE VI INCORPORATOR

The name and address of the Incorporator is:
Benjamin Perry
777 Avalon Street
Lake City, FL 32055

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.


Signature/Registered Agent

10-2-01
Date


Signature/Incorporator

10-2-01
Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA