## N030000645

(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:				





700021619937

07/28/03--01017--014 \*\*87.50

03 JUL 28 PN 3: 35
SECRETARY OF STATE

ma 0 4

## TRANSMITTAL LETTER

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

SUBJECT: Revealing The Truth Ministries, Inc.

Enclosed is an original a	nd one(1) copy of the arti	cles of incorporation and a	check for:
□\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate
		ADDITIONAL COPY REQUIRED	

FROM: Pastor Clifford Kelly Jr.
Name (Printed or typed)

6200 S. Barnes Rd. Hot #5-6
Address

Tacksonville, Florida 32216
City, State & Zip

(904)866-5145

Daytime Telephone number

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

## ARTICLES OF INCORPORATION

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

The name of the corporation shall be: Revealing The Truth Ministries, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:
6200 S. Barnes Rd. Apt. ## 5-6

Jacksonville, Florida 32211

ARTICLE III PURPOSE
The purpose for which the corporation is organized is: To help feed the hungry, need and home.
To help direct people back to Good.
To help train, cultivate and prepare individuals for employment.
To help direct people back to excellent morals.

ARTICLE IV MANNER OF ELECTION
The manner in which the directors are elected or appointed:
Our directors are voted in by the members of this church.

ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS
List name(s), address(es) and specific title(s):

ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS
List name(s), address(es) and specific title(s):
Tonishea M. Campbell 1553 East 30th St. Jax, Flu Chief Administra
Damon L. Mixon 1333 Dunna Ave Apt. #802 "Treasurer"
Sean D. Gubson 1553 East 30th St. Jax, Flu "Director"

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Clifford Kelly Dr.
620D S. Barnes Rd Apt. #5-6

Jacksonville, Florida 3221L

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Clifford Kelly Dr.
6200 S. Barnes Rd. Apt # 5-6

Jacksonville Florida 32216

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this cortificate. I am familiar with and accept the appointment as registered agent and agree to act in this capacity.

Signature Registered Agent Date

Signature/Incorporator

<u>7-15-03</u>