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(Requestor's Name)		
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(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates	of Status
Consist Instructions to		
Special Instructions to	Filing Officer:	
		

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SECRETARY OF STATE
TALL AVASSES FLORING

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TRANSMITTAL LETTER

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

SUBJECT: CHRIST IS THE ANSWER WORSHIP FELLOWSHIP MINISTRIES CORP.

(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

75 **4** \$87.50 Filing Fee,

Filing Fee & Certified Copy

Certified Copy

& Certificate

ADDITIONAL COPY REQUIRED

FROM: PASTOR OLIVER L.C. WILLABUS

Name (Printed or typed)

196 HIDDENS SPRINGS CIRCLE
Address

KISSIMMEE, FLORIDA 34743 City, State & Zip

1 - 407 - 962 - 6297

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)

ARTICLE I NAME

The name of the corporation shall be:

CHRIST IS THE ADSWER WORSHIP & FELLOWSHIP MINISTRIES CORP.

ARTICLE II PRINCIPAL OFFICE

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

196 HIDDENS SPRINGS CIRCLES KISSIMMEE, FLORIDA 34743

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TO ESTABLISH AND MAINTAIN A PLACE OF WORSHIP OF ALMIGHTY GOD.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:

THE PASTOR APPOINTS HIS OFFICIALS, AND THEY ARE VOTED IN BY THE CONGREGATION.

ARTICLE V INITIAL DIRECTORS/OFFICERS

The name(s), address(es) and title(s):

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

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

PASTOR OLIVER L.C. WILLABUS
196 HIDDENS SPRINGS CIRCLE KISSIMMEE, FL 34743

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

PASTOR OLIVER L.C WILLABUS
196 HIDDEN SPRINGS CIRCLE, KISSIMMEE, FL, 3478

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

Date

Alin Willatus

Date

Signature/Incorporator