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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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FLORIDA

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TRANSMITTAL LETTER

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

SUBJECT: Pentecostal International Deliverance Ministry of Ft. Walton  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)  
Beach, FL Inc.

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: Pastor Annie Neal  
Name (Printed or typed)

206 Hickory St.  
Address

Fort Walton Beach, FL 32548  
City, State & Zip

850-642-1386  
Daytime Telephone number

STATE  
DIVISION OF  
CORPORATIONS  
TALLAHASSEE, FLORIDA

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

## Articles of Incorporation

### Article I:

Pentecostal International Deliverance Ministry of Fort Walton Beach FL Inc.

### Article II:

206 Hickory St.  
Fort Walton Beach FL. 32548

### Article III:

To study the Word and perform all the things Jesus said we should, could and can do. We fast and pray being led by the Holy Spirit to give direction, correction, healing, and deliverance through the Holy Bible to those that ask or acknowledge they have a need.

### Article IV:

All directors were and will always be appointed by Pastor and Founder Mrs. Annie Neal.

### Article V:

Director – Pastor Annie Neal  
305 North West Dates Ave.  
Ft. Walton Beach, FL. 32548

Director – Prophet Ervin Neal  
305 North West Dates Ave.  
Ft. Walton Beach, FL. 32548

Director – Minister Charlie Ervin  
108 Hudson Dr.  
Ft. Walton Beach, FL. 32548

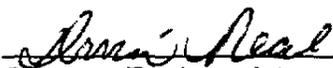
### Article VI:

Mrs. Annie Bell Neal  
305 North West Dates Ave.  
Ft. Walton Beach, FL. 32548

### Article VII:

Mrs. Annie Bell Neal  
305 North West Dates Ave.  
Ft. Walton Beach, FL. 32548

*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/Incorporator

  
\_\_\_\_\_  
Date.

FILED  
JUL 19 11 29 AM  
STATE OF FLORIDA