

**No 5000002453**

\_\_\_\_\_  
(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:

\_\_\_\_\_

Office Use Only

*[Handwritten signature]*



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03/02/05--01033--022 \*\*87.50

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05 MAR -2 PM 3:04  
CLERK OF STATE  
TALLAHASSEE, FLORIDA

## TRANSMITTAL LETTER

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

**SUBJECT:** Here Am I Ministries, 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:** John A. Lacey  
Name (Printed or typed)

P.O. Box 291586  
Address

Port Orange, FL 32129-1586  
City, State & Zip

386-304-1986  
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:

Here Am I Ministries, Inc.

**ARTICLE II PRINCIPAL OFFICE**

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

Place of Business: 3859 Cardianl Blvd, Port Orange, FL 32127

Mailing Address: P.O. Box 291586, Port Orange, FL 32129-1586

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

The corporation is organized to be a charitable organization that helps further the believes of Christianity by spreading of the Gospels and helping the poor.

**ARTICLE IV MANNER OF ELECTION**

The manner in which the directors are elected or appointed:

Directors are appointed by officers based upon their just wisdom and willingness to uphold the virtures and teachings of the Word of God.

**ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS**

List name(s), address(es) and specific title(s):

Title: President

John A. Lacey

P.O.Box 291586

Port Orange, FL 32129-1586

Title: Vice President

Luanna Lacey

P.O.Box 291586

Port Orange, FL 32129-1586

**ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Luanna Lacey

3859 Cardianl Blvd.

Port Orange, FL 32127

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

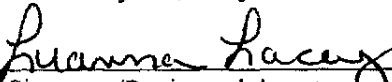
John A. Lacey

3859 Cardinal Blvd.

Port Orange, FL 32127

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*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

2/27/2005

\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Signature/Incorporator

2/27/2005

\_\_\_\_\_  
Date

FILED  
05 MAR -2 PM 3:04  
CLERK OF STATE  
TALLAHASSEE, FLORIDA