

NO60000001162

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

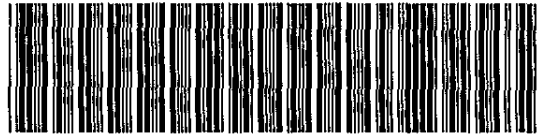
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

OK per Mr. Jones
to correct Corp
Suffix CAT

Office Use Only



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FILED
06 JAN 31 PM 3:09
TALLAHASSEE, FLORIDA

2/3
SPK

COVER LETTER

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

SUBJECT: Blessed Hope Ministry 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: Devon Jones

Name (Printed or typed)

875 Wilmette Ave Apt 812

Address

Ormond Beach FL. 32174

City, State & Zip

386-682-2517

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:

Blessed Hope Ministry Incorporated

ARTICLE II PRINCIPAL OFFICE

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

208 Midway Ave, Ormond Beach FL. 32174-6330

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To provide religious worship and ministering sacerdotal functions. to provide public or private prayer, religious study, teaching, caring for the aging and bring hope to the hopeless.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:

The directors were elected through nomination

ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS

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

Devon Jones(president) 875 Wilmette Ave, Apt812 Ormond Beach FL.32174.

Melinda Foley Musante (Secretary) 1620 Chestnut Ave, Winter Park FL. 32789.

Jacqueline Jones (Secretary Treasurer) 875 Wilmette Ave, Ormond Beach FL. 32174.

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Devon Jones, 875 Wilnette Ave, Apt 812 Ormond Beach FL> 32174

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Devon Jones, 875 Wilmette Ave APt 812 Ormond Beach FL. 32174

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TALLAHASSEE, FLORIDA

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.

 DEVON A. JONES
Signature/Registered Agent

1-20-06
Date

 DEVON A. JONES
Signature/Incorporator

1-20-06
Date