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DIVISION OF CORPORATIONS
06 SEP 11 PM 2:43

2827

COVER LETTER

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

SUBJECT: Broken Chains 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: Selwyn B. Moran
Name (Printed or typed)

P.O. Box 9083
Address

Winter Haven, FL 33883-9083
City, State & Zip

(863) 298-9685
Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 31, 2006

SELWYN B. MORAN
P.O. BOX 9083
WINTER HAVEN, FL 33883-9083

SUBJECT: BROKEN CHAINS MINISTRIES, INC.
Ref. Number: W06000038627

We have received your document for BROKEN CHAINS MINISTRIES, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please list the complete principal office address with city, state and zip.

The registered agent and street address must be consistent wherever it appears in your document.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6962.

Valerie Herring
Document Specialist
New Filing Section

Letter Number: 606A00053421

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ARTICLES OF INCORPORATION
OF

Broken Chains Ministries, Inc.
a Non-Profit Florida Corporation

(Pursuant to Chapter 617, Florida Statutes.)

The undersigned has, for the purpose of forming a non-profit corporation under the laws of Florida, adopted the following Articles of Incorporation

1. **Name.**

The name of the Corporation is Broken Chains Ministries, Inc..

2. **Principal Office.**

The principal place of business and mailing address of the corporation is:

Principal Office of Business
111 Avenue R N.E.
Winter Haven, FL 33884.
Mailing Address
P.O. Box 9083
Winter Haven, FL 33883-9083

3. **Purposes.**

The nature of the business or purposes to be conducted or promoted is to engage in any lawful act or activity for which non-profit corporations may be organized under the General Corporation Law of Florida. Our main purpose is to give services to offenders, ex-offenders and their families as well as those persons in need of our services that are of high, mid to lower income status.

4. **Tax Exempt Status.**

The tax exempt purpose of this corporation shall be to receive and maintain a fund or funds of real or personal property or both and, subject to the restrictions and limitations which are hereinafter set forth, to use and apply the whole or any part of the income from the principal of the fund or funds exclusively for charitable, religious, scientific, literary or educational purposes, either directly or by contributions to organizations that qualify as exempt organizations under 501(c)(3) of Internal Revenue Code and its regulations as they now exist or any may hereafter be amended. Notwithstanding any other provision of these Articles of Incorporation, this corporation shall not conduct or carry on any activities not permitted to be conducted or carried on by organizations described in 501(c)(3) of the Internal Revenue Code and its regulations as they now exist or as they may hereafter be amended.

5. Manner of Election.

The manner in which the directors are elected or appointed is: Directors appointed by Board Chairman. The Board Chairman shall hold his/her position until they desire to resign thus passing the position to what person they see fit to keep the organization running and meeting it's mission.

6. Board of Directors.

The number of directors of the corporation shall be fixed and may be altered from time to times as may be provided in the by-laws. In case of any increase in the number of directors, the additional directors may be elected by the directors or by the members at an annual or special meeting or appointed by the chairman of the board, as shall be provided in the by-laws.

The names and address of the members of the intitial Board of Directors, who shall serve until their successors are qualified according to the by-laws, are:

Selwyn B. Moran I
Chairman of Board
605 Kings Lane SW
Winter Haven, FL 33880-1778

Dominique Davis
Board Treasurer
3002 Pine Cone Drive
Kissimmee, FL 34741

Cecilia Black
Board Secretary
958 Wedgewood Drive SW
Winter Haven, FL 33880

7. Registered Agent.

This corporation appoints Selwyn. B. Moran, I, who has been a bona fide resident of the State of Florida for at least three years, as its Registered Agent in and for the State of Florida and any other State this corporation may enter. The complete name and address of the Registered Agent is:

Selwyn B. Moran I
605 Kings Lane SW
Winter Haven, FL 33880-1778

FROM :

FAX NO. :

Sep. 12 2006 01:18PM P4

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8. Incorporator.

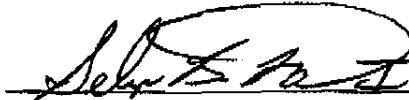
The name and mailing address of the incorporator is:

Selwyn B. Moran I
605 Kings Lane SW
Winter Haven, FL 33880-1778.

9. Effective Date.

These Articles are to be effective the date of filing unless otherwise specified below:


IN WITNESS WHEREOF, the following incorporator has signed these Articles of Incorporation this date:


Selwyn B. Moran I

ACCEPTANCE BY REGISTERED AGENT

Having been named as a 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.

DATE: 9/12/06


Selwyn B. Moran I