

**N07000000000**

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

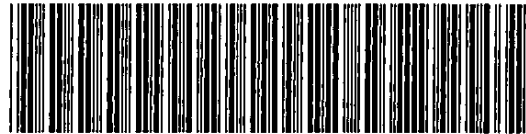
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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

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FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
07 JAN - 5 AM 8:01



**COVER LETTER**

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

SUBJECT: Caring and Sharing 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: Gwendolyn A. Henry  
Name (Printed or typed)

847 NW Wilson Street  
Address

Lake City FL 32055  
City, State & Zip

386 755-9451  
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)

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

**ARTICLE I NAME**

The name of the corporation shall be:

Caring And Sharing Ministry Inc. 07 JAN -5 AM 8:01

**ARTICLE II PRINCIPAL OFFICE**

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

847 NW Wilson street  
LAKE CITY FL 32055

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: Loving people and sharing the good news of Christ. A non profit ministry not for personal gain. To clothe feed and Ass.t. in what ever manner we can to help the TOTAL man. Based on the scriptures st. matt. 25-36 41

**ARTICLE IV MANNER OF ELECTION**

The manner in which the directors are elected or appointed:

AS founder of the ministry I'm the name Director future we be as vice or person in second position thur the approval of name Director and Board members and faithfulness to the work of ministry.

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

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

Wanda L. Alston 708 N.W. Wilson St. LAKE CITY FL 32055 - Secretary  
Gwendolyn A. Henry 847 NW Wilson St LAKE CITY FL 32055 president  
Valentine Jackson 1728 N.W. Moore Road LAKE CITY FL 32055 Board member  
Coreuse McGuire P.O. Box 681 Alucha FL 32616 - Board member

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

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

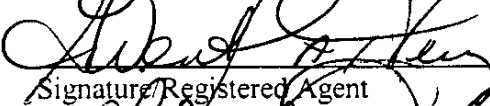
Gwendolyn A. Henry  
847 NW Wilson Street  
LAKE CITY FL 32055

**ARTICLE VII INCORPORATOR**

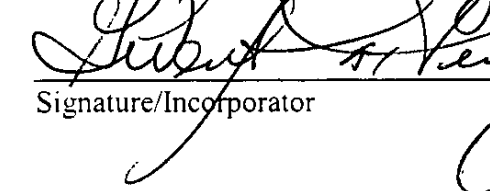
The name and address of the Incorporator is:

SAME AS ABOVE Gwendolyn A. Henry  
847 NW Wilson Street  
LAKE CITY FL 32055

\*\*\*\*\*  
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

12/29/06  
\_\_\_\_\_  
Date

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

\_\_\_\_\_  
Date