## NO 1888880639

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Business Entry Numb)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				



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SECRETARY OF STATE

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## **COVER LETTER**

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

SUBJECT:	WATCHERS & EAGLES MINISTRY, INC.		
-	(PROPOSED CORPORATI	E NAME – <u>MUST INCLU</u>	DE SUFFIX)
Enclosed is an original and	d one(1) copy of the Articl	es 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 CO	PY REQUIRED
FROM:	BI ANCA BERMI	IDEZ- DAVID	
FROM: _	BLANCA BERMUDEZ- DAVID  Name (Printed or typed)		
_	395 Ponce Har		_
	Address		
_	ST AUGUSTINE,FL. 32086		_
_	City, State & Zip		
	904-315-5021		

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

Daytime Telephone number



## In Compliance with Chapter 617, F.S., (Not for Profit)

ARTICLE I NAME

The name of the corporation shall be:

Watchers & Eagles Ministry Inc.

ARTICLE II PRINCIPAL OFFICE

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

395 Ponce Harbor Drive, #202, St. Augustine, Florida, 32086

ARTICLE III **PURPOSE** 

The purpose for which the corporation is organized is:

A non Profit Charitable organization that will provide Spiritual and physical support, Counseling, Ministry Training, aid, food and clothing to members of the community as well as impoverished and distressed individuals.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:

The directors and officers will be appointed by the President.

ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS

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

Blanca Bermudez -David President/Vice President/Treasurer/Secretary, 395 Ponce Harbor Drive, St. Augustine, Fl. 32086

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: Blanca Bermudez-David, President, 395 Ponce Harbor, #202, St. Augustine, Fl. 32086

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Blanca Bermudez-David, President, 395 Ponce Harbor Drive, #202, St. Augustine, Fl. 32086

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Blanco Bernicle David. Signature/Registered Agent	
Blanca Bernicle - David. Signature/Incorporator	