

NO 7000002474

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

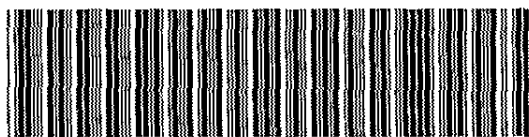
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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07 MAR -9 PM 12:34
RECEIVED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
07 MAR -9 PM 1:46

J. Stiles MAR 09 2007

COVER LETTER

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

SUBJECT: Victory Network 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: Dorothy Baines
Name (Printed or typed)

1221 MY-04-MY LN
Address

Tallahassee FL 32305
City, State & Zip

858-264-7956
Daytime Telephone number

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TALLAHASSEE, FLORIDA

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:

Jehovah Tovah Ministry Inc.

ARTICLE II PRINCIPAL OFFICE

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

9561 Capitolard Tall. Fla, 32317

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Transitional Housing/Homeless Shelter
to teach how to live independent before transitioning to the community.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:

Director, Social workers
Board members

ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS

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

Director - Dorothy Raines 1221 my-oh-my Ln. Tall. Fl 32305
Social worker Willie McMillan
Calvin Dawkins - Rt. 1 Box 1291 Chatt. 71 32324
Betty J. Bennett. Rt. 1 Box 1289 Chatt. 71. 32324

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Dorothy Raines
1221 my-oh-my Ln.
Tall. Fl 32305

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Dorothy Raines
1221 - my-oh-my Ln
Tall. Fl 32305

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07 MAR -9 PM 2:02
SECRETARY OF STATE
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.

Mp. Dorothy Raines
Signature/Registered Agent

3-8-07
Date

Mp. Dorothy Raines
Signature/Incorporator

Date