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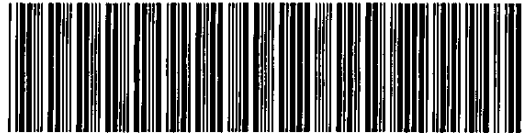
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9/7/07

**COVER LETTER**

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DIVISION OF CORPORATIONS

07 SEP -6 AM 9:11

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

SUBJECT: JELECTIA L. BURSE Ministry  
(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: JELECTIA L. BURSE  
Name (Printed or typed)

1002 JASMINE COURT  
Address

SOUTH BAY, FL 33493  
City, State & Zip

561-993-2555  
Daytime Telephone number

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



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FLORIDA DEPARTMENT OF STATE  
Division of Corporations

April 4, 2007

FELECIA L. BURSE  
1002 JASMINE COURT  
SOUTH BAY, FL 33493

SUBJECT: FELECIA L. BURSE MINISRTY  
Ref. Number: W07000016551

We have received your document for FELECIA L. BURSE MINISRTY and your check(s) totaling \$88.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

It appears the filing submitted has a typographical error in the entity name. Please verify this name and all other information contained in the filing and resubmit it for processing.

The name of the corporation must contain a corporate suffix. This suffix may be: CORPORATION, CORP., INCORPORATED, or INC. Sections 617.0401(1)(a) and 617.1506(1), Florida Statutes, prohibits the use of the word COMPANY or CO. in the name of a non-profit corporation.

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) 245-6973.

Claretha Golden  
Document Specialist  
New Filing Section

Letter Number: 507A00022909

**ARTICLES OF INCORPORATION  
OF  
FELECIA L. BURSE MINISTRIES, INC.**

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DIVISION OF CORPORATIONS

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- ONE:** The name and address of this principal corporation is:  
**FELECIA L. BURSE MINISTRIES, INC. 537 S.W. 10<sup>TH</sup> ST. SUITE 3 BELLE GLADE, FL. 33430.** This corporation is organized pursuant to **FLORIDA Nonprofit Corporation Code.**
- TWO:** This Corporation is a nonprofit public benefit corporation and is not organized for the private gain of any person. The corporation is organized under the Nonprofit Public Benefit Corporation Law for, charitable and educational purposes to aid the poor and disadvantage individuals and families towards a life of self-sufficiency. The programs will consist of but shall to be limited to: Job training, Job Placement, Land Acquisition, housing, Employment, Literacy, Counseling, Temporary Shelter, Teenage Pregnancy, and other programs to aid those in need.
- THREE:** The duration of this corporation shall be perpetual, no stock and shall have members.
- FOUR:** The address of the registered office is **537 S.W. 10<sup>TH</sup> ST. SUITE 3 BELLE GLADE, Florida, 33430,** and the name and address of the registered agent of the corporation shall be: **Felecia L. Burse 537 S.W. 10<sup>TH</sup> ST. SUITE 3 BELLE GLADE, FL. 33430.**
- FIVE:** (a) This Corporation is organized and operated exclusively Educational and Charitable purposes within the meaning of section 501(c)(3) of the Internal Revenue Code.
- (b) Notwithstanding any other provision of these Articles, the corporation shall not carry on any other activities not permitted to carry on (1) by a corporation exempt from federal income tax under Section 501 (c)(3) of the Internal Revenue Code or (2) by a corporation contributions to which are deductible under Section 170 (c)(2) of the Internal Revenue Code.
- SIX:** The Directors are elected in accordance with the By-Laws. The name and Address of the persons appointed to act as the initial Directors of this corporation are:
- | NAME | ADDRESS |
|------|---------|
|------|---------|

Felecia L. Burse  
PRESIDENT

537 S.W. 10<sup>TH</sup> St. SUITE 3  
Belle Glade, Fl. 33430

Jan Fuller  
SECRETARY

537 S.W. 10<sup>th</sup> St. suite 3  
Belle Glade, Fl. 33430

Devonna Tommie  
TREASURER

190 N SR 715 Lt 253  
Belle Glade, FL. 33430

**SEVEN:** The property of this corporation is irrevocably dedicated to Charitable and Educational purposes and no part of the net income or assets of the organization shall ever inure to the benefit of any director, office of member thereof or the benefit of any private person..

**EIGHT:** On the dissolution or winding up of the corporation, its assets remaining after payment of, or provision for payment of, all debts, and liabilities of this corporation which is organized and operated exclusively, for, Educational and Charitable under section 501 (c) (3) of the Internal Revenue Code, or corresponding section of any future Federal tax code, or shall be distributed to the federal government, or to a state or local government for a public purpose. Any such asset not disposed of by the Court of Common Pleas of the county in which the principal office of the organization is located, exclusive for such purposes or to such organization or organizations, as said court shall determine which are organized and operated exclusively for such purposes.

**NINE:** Executed on March 18, 2007. The name address of the incorporator of this corporation shall be:



**Signature**

**Felecia Burse**  
**537 SW 10<sup>TH</sup> St.. SUITE 3**  
**Belle Glade, FL. 33430**

# CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 OR 617.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is: TELECIA L. Burse Ministries, Inc.  
(must include suffix)

2. The name and address of the registered agent and office is:

TELECIA L. Burse  
(Name)

537 S.W 10<sup>th</sup> Str. Suite 3  
(Street address – P.O. Box or Mail Drop Box NOT acceptable)

Belle Glade, FL 33430  
(City/State/Zip)

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*Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes, relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.*

Telecia L. Burse  
(Signature)

9.4.07

(Date)