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(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phon	ne #)
PICK-UP	☐ WAIT	MAIL
_ (Bu	siness Entity Na	me)
(Do	cument Number)	
Certified Copies	Certificate	s of Status
Special Instructions to I	Filing Officer:	
-t	UM Y	19190

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IALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT:	GOD'S HOUSE OF REFUGE OUTREACH MINISTRIES INC.
	(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)

Enclosed is an original a \$70.00 Filing Fee	nd one(1) copy of the Art 7 \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate
		ADDITIONAL COPY REQUIRED	

r KOM.	1 7 WILL 1 D. 0011L0		
	Name (Printed or typed)		
	P.O. BOX 236414		
•	Address		
	COCOA, FLORIDA 32923-6414		
_	City, State & Zip		
	(321) 403-6563		
•	Daytime Telephone number		

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



FLORIDA DEPARTMENT OF STATE Division of Corporations

October 4, 2007

PAMELA D. JONES P.O. BOX 236414 COCOA, FL 32923-6414

SUBJECT: GOD'S HOUSE OF REFUGE OUTREACH MINISTRIES, INC.

Ref. Number: W07000049190

We have received your document for GOD'S HOUSE OF REFUGE OUTREACH MINISTRIES, INC.. However, the document has not been filed and is being returned for the following:

Florida law requires the street address of the principal office and, if different the mailing address of the entity. A post office box is not acceptable for the principal office.

An effective date <u>may</u> be added to the Articles of Incorporation <u>if a 2008 date is needed</u>, otherwise the date of receipt will be the file date. <u>A separate article must be added to the Articles of Incorporation for the effective date.</u>

Please return 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) 245-6934.

Letter Number: 407A00058064

Loria Poole Regulatory Specialist II

Division of the DO DOV coor will be in controlled

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be:

GOD'S HOUSE OF REFUGE OUTREACH MINISTRIES INC.

ARTICLE II PRINCIPAL OFFICE

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

1549 N. COCOA BLVD. COCOA, FL32922 P.O.BOX 236414 COCOA, FL32923-6414 < MAILING ADDRESS

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

- (A). TO WORK IN ACCORDANCE IN THE TEACHING OF GOD WORD FOR THE SPREADING OF THE GOSPEL OF JESUS CHIRST.
- (B). SALVATION OF SOULS TO UNITE BELIEVERS IN SPIRITUAL FELLOWSHIP AND SERVICE.
- (C). TO SUPORT THE MISSION AT HOME AND ABROAD WITH THE TRUE WORD OF GOD.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:

GENERAL THE MEMBERS ARE ELECTED.

- (A). THE QUALIFICATIONS OF THE OFFICERS SHALL BE BASED ON FIRST TIMOTHY THE THIRD CHAPTER.
- (B). THOSE THAT HAVE BEEN BORN AGAIN WHO HAS A GOOD REPUTATION AS TO THEIR LIFE AND CHARACTER.
- (C). MADE A PUBLIC PROFESSION OF THEIR FAITH, ALL OFFICERS SHALL BE MEMBERS OF THE CHURCH FOR AT LEAST ONE YEAR.

ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS

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

BYRON B. JONES 321 WOODS LAKE DR. COCOA, FL32926- PASTOR BYRON B. JONES 321 WOODS LAKE DR. COCOA, FL32926- TREASURER PAMELA D.JONES 321 WOODSLAKE DR. COCOA, FL32926- PASTOR PAMELA D.JONES 321 WOODSLAKE DR. COCOA, FL32926- SECRETARY

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

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

PAMELA D. JONES 321 WOODS LAKE DR COCOA, FL32926

ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is:

PAMELA D. JONES 321 WOODS LAKE DR COCOA, FL32926

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, Lamfamiliar with and accept the appointment as registered agent and agree to act in this capacity.

Signature/Registered Agent

Signature/Incorporator

<u> 4 | 28 | 07</u>

Date