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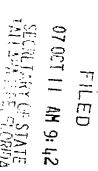
(Re	questor's Name)	
(Add	dress)	
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(Cit	y/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	e)
(Do	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to I	Filling Officer:	
		





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COVER LETTER

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

SUBJECT: <u>Tabernacle Refuge Relief Ministry International, Corporation</u> (PROPOSED CORPORATE NAME - <u>MUSTINCLUDE SUFFIX</u>)

\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy ADDITIONAL CO	x \$87.50 Filing Fee, Certified Copy & Certificate	
FROM: Rev. Dr. Abron Marshall, Jr. Name (Printed or typed)				
2561 Markhall Lane Address				
Green Cove Springs, Florida 32043 City, State & Zip				
	(904) 529_9 Daytime Tele	250 ephone number		

Enclosed is an original and one(1) copy of the Articles of Incorporation and a check for:

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:

Tabernacle Refuge Relief Ministry International, Corp.

ARTICLE II PRINCIPAL OFFICE

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

4020 Pier Sat Station Road West

Green Cove Springs, Florida 32043 _

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Unifying to give relief to our fellow yoke-men of the Gospel.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:

As noted in Company By-Laws

ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS

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

Rev. Dr. Abron Marshall, Jr. CEO, Founder Rev. Daniel Burney, President

Rev. Lonnie Daniel, Vice Presidnet

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Rev. Dr. Abron Marshall, Jr.

2561 Marshall Lane Green Cove Springs, Fl

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Rev. Dr. Abron Marshall, Jr.

2561 Marshall Lane Green Cove Springs, F1 32043 _

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

Rev. Dr. Abron Marshall, Jr.

Signature/Incorporator

Rev. Dr. Abron Marshall, Jr.

10-9-07 Date