# N0800001845

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

3.3

Office Use Only



100117591141

02/11/08--01030--023 \*\*87.50

SECRETARY OF STATE TALLAHASSEE, FLORIDI

08 FEB 25 AKII: 49



W08-7721

# **COVER LETTER**

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

SUBJECT: CALLED	AND SET APART LIVIN	G MINISTRIES			
<del>.</del>	(PROPOSED CORPORATE	E NAME – <u>MUST INCLU</u>	DE SUFFIX)		
Englaced is an original	and ana(1) converthe Article	es of Incompration and	chack for		
Enclosed is an original and one(1) copy of the Articles of Incorporation and a check for:					
\$70.00	<b>\$78.75</b>	<b>\$78.75</b>	<b>▼</b> \$87.50		
Filing Fee	Filing Fee &	Filing Fee	Filing Fee,		
	Certificate of	& Certified Copy	Certified Copy		
	Status		& Certificate		
		ADDITIONAL CO	PY REQUIRED		
FROM: PASTOR PATIENCE FAITH MCDONALD  Name (Printed or typed)					
rame (rames or speed)					
365 WEST TERRACE AVENUE					
Address					
LAKE ALFRED, FLORIDA 33850			_		
City, State & Zip					
863-299-7945 OR 863-797-7558					
Daytime Telephone number					

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



February 11, 2008

PASTOR PATIENCE FAITH MCDONALD 365 WEST TERRACE AVE LAKE ALFRED, FL 33850

SUBJECT: CALLED AND SET APART LIVING MINISTRIES

Ref. Number: W08000007221

We have received your document for CALLED AND SET APART LIVING MINISTRIES and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

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.

Please return the corrected 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 (1) (850) 245-6931.

Becky McKnight Regulatory Specialist II New Filing Section

Letter Number: 708A00008843

#### ARTICLES OF INCORPORATION

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

#### ARTICLE I NAME

The name of the corporation shall be:

CALLED AND SET APART LIVING MINISTRIES INC.

#### ARTICLE II PRINCIPAL OFFICE

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

1500 42ND STREET NORTH WEST WINTER HAVEN, FLORIDA 33880

#### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TO EDUCATE, TEACH, AND PREACH THE GOSPHEL OF JESUS CHRIST.



## ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:

DIRECTORS/OFFICERS SHALL BE ELECTED OR APPOINTED AS FOLLOWS..... BY RH CHURCH AND CHURCH MEMBERS.

# ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS

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

PASTOR JOSHUA DELMER TAYLOR/VICE PRESIDENT/3181US.HWY17 SOUTH BARTOW,FL 33830

PAMELA FAITH CONIBEAR/TREASURER/3925 COUNTRY PLACE WINTER HAVEN,FL33880 DOTTIE HALL/SECRETARY/ 445 AVENUE I SOUTHEAST WINTER HAVEN,FL 33880

### ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

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

PASTOR PATIENCE FAITH MCDONALD 3925 COUNTRY PLACE WINTER HAVEN, FLORIDA 33880

#### ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is: PASTOR PATIENCE FAITH MCDONALD 3925 COUNTRY PLACE WINTER HAVEN, FLORIDA 33880

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.

ignature/Registered Agent

Signature/Incorporator

Date

Date