

N08000003732

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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2008 APR 16 AM 8:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

4/17

COVER LETTER

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

SUBJECT: God's Manifested Glory International 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:

DARRIN M. Johnson
Name (Printed or typed)

4839 Stone Acres Circle
Address

SAINT CLOUD, FL 34771
City, State & Zip

407-844-9357
Daytime Telephone number

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

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

2008 APR 16 AM 8:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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ARTICLE I NAME

The name of the corporation shall be:

God's Manifested Glory International INC

ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is:

4839 Stone Acres Circle
Saint, Cloud, FL 34771

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

the organization is organized solely & exclusively to promote & encourage charitable activity within the means of section 501(c)(3) of the IRS code of 1986 by providing the word of God, feeding to needed, providing programs for economic health & help for all people.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:

Directors shall be nominated by the body, confirmed by the Pastor & approved by a 3/4 vote of the members present. This Director will hold their position for an indefinite period of time.

ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS

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

President DARRIN M. JOHNSON 4839 Stone Acres Circle St. Cloud, FL 34771
Vice President TANYA K. JOHNSON 4839 Stone Acres Circle St. Cloud, FL 34771
Secretary JOSHUA D. WARD-JOHNSON 4839 Stone Acres Circle, St. Cloud 34771

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

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

DARRIN M. JOHNSON
4839 Stone Acres Circle
St. Cloud, FL 34771

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

DARRIN M. JOHNSON
4839 Stone Acres Circle
St. Cloud, FL 34771

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

Date


4/13/2008

Signature/Incorporator


Date

4/13/2008

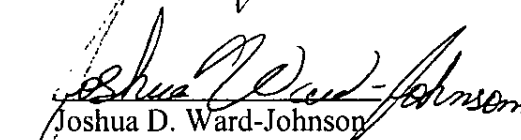
IN WITNESS THEREOF, each of he undersigned has executed this consent as of the
____ of April 2008



Darrin M. Johnson



Tanya K. Johnson



Joshua D. Ward-Johnson