

No8000006597

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MAIL

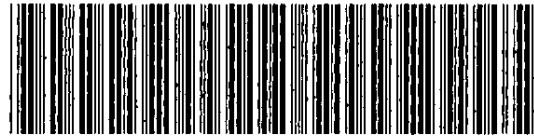
(Business Entity Name)

(Document Number)

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2008 JUL 14 PM 4:23  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

C8.7-14

## COVER LETTER

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

**SUBJECT:** Abundant Life Changing Ministries, Incorporated  
(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:** Lee Norris Grimes  
Name (Printed or typed)  
6450 Greenwood Ave  
Address  
Cocoa FL, 32927  
City, State & Zip  
321-427-0675  
Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

RECEIVED  
08 JUL 14 AM 8:00  
DIVISION OF CORPORATIONS

July 1, 2008

LEE NORRIS GRIMES  
6450 GREENWOOD AVE.  
COCOA, FL 32927

SUBJECT: ABUNDANT LIFE CHANGING MINISTRIES, INCORPORATED  
Ref. Number: W08000031285

We have received your document for ABUNDANT LIFE CHANGING MINISTRIES, INCORPORATED 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 designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

**Adding "of Florida" or "Florida" to the end of a name is not acceptable.**

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 (850) 245-6047.

Carolyn Lewis  
Regulatory Specialist II  
New Filing Section

Letter Number: 608A00039031

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

**FILED**

**ARTICLE I NAME**

The name of the corporation shall be:

Abundant Life Changing Ministries International, Incorporated

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE II PRINCIPAL OFFICE**

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

563 Barton Boulevard

Suites 9 & 10

Rockledge, FL 32955

Mailing Address: P.O Box 237253

Cocoa, FL 32923-7253

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

This church is a non-profit organization organized and operated for the exclusive religious purposes of preaching and teaching of the Gospel of Jesus Christ according to the Word of God. Winning Souls for the Kingdom of God. So that the people of God may inherit eternal life.

**ARTICLE IV MANNER OF ELECTION**

The manner in which the directors are elected or appointed:

The board of Trustees are all appointed by the President/Senior Pastor/Founder

**ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS**

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

Lee Norris Grimes, 6450 Greenwood Ave, Cocoa FL 32927: President/Senior Pastor/Founder

Shannon Elaine Grimes, 6450 Greenwood Ave, Cocoa FL 32927: Vice President/Pastor

Gerald Lindsay Maze, 263 Western Ave, Cocoa, FL 32926: Treasurer/Minister

**ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS**

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

Lee Norris Grimes

6540 Greenwood Avenue

Cocoa, FL 32927

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Lee Norris Grimes

6540 Greenwood Avenue

Cocoa, FL 32927

\*\*\*\*\*  
*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

7-7-2008

\_\_\_\_\_  
Signature/Incorporator

\_\_\_\_\_  
Date

7-7-2008