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(Requestor's Name)

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(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

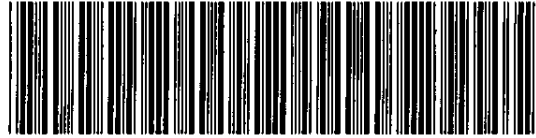
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2009 OCT -1 PM 1:37  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## COVER LETTER

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

SUBJECT: SIGN LANGUAGE MINISTRY, 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: LISA MCCLUNG  
Name (Printed or typed)

833 MUIRFIELD CIRCLE  
Address

APOPKA FL 32712  
City, State & Zip

407-463-1407  
Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

September 24, 2008

LISA MCCLUNG  
833 MUIRFIELD CIRCLE  
APOPKA, FL 32712

SUBJECT: SIGN LANGUAGE MINISTRY, INC.  
Ref. Number: W08000044353

RECEIVED  
08 OCT - 1 AM 08 00  
FACSIMILE TELEPHONE UNIT

We have received your document for SIGN LANGUAGE MINISTRY, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

A corporation may not serve as its own registered agent. Please designate an individual or another active entity filed or registered with this office, having a Florida street address.

A corporation may not act as its own incorporator. Please designate an individual, another active domestic or foreign corporation, with a street address.

Section 617.0202(d), Florida Statutes, requires the manner in which directors are elected or appointed be contained in the articles of incorporation or a statement that the method of election of directors is as stated in the bylaws.

The registered agent must sign accepting the designation.

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.

Loria Poole  
Regulatory Specialist II

Letter Number: 008A00051425

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

**ARTICLE I NAME**

The name of the corporation shall be:

SIGN LANGUAGE MINISTRY

**ARTICLE II PRINCIPAL OFFICE**

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

833 MUIRFIELD CIRCLE  
APOPKA FL 32712

P.O. BOX 1154

APOPKA FL 32704

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

TO SHARE THE GOSPEL OF JESUS CHRIST TO OUR DEAF & HARD OF HEARING & FOR THEM TO GROW IN JESUS, ALSO, TEACH SIGN LANGUAGE TO HEARING & DEAF PEOPLE. AND HELP THE HEARING TO INTERPRET CHRISTIAN MUSIC SO THE DEAF WILL UNDERSTAND SO WE CAN COMMUNICATE MORE EFFECTIVELY.

**ARTICLE IV MANNER OF ELECTION**

The manner in which the directors are elected or appointed:

LISA MCCLUNG / FOUNDER HAS ELECTED THE BOARD OF DIRECTORS.

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

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

① LISA MCCLUNG / FOUNDER ② PRESIDENT-

833 MUIRFIELD CIRCLE  
APOPKA FL 32712

REV. THEODORE H. FREEMAN JR.  
511 RAMONA LANE, ORLANDO FL 32805

③ V.P. PASTOR DONNA MCADOO  
P.O. BOX 916772, LONGWOOD FL 32791

④ TREASURER-  
DAVID CONTOS  
5104 HARPER  
VALLEY ROAD  
APOPKA FL 32712

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

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

LISA MCCLUNG  
833 MUIRFIELD CIRCLE  
APOPKA FL 32712

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

LISA MCCLUNG  
P.O. BOX 1154 APOPKA FL 32704

\*\*\*\*\*  
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

9-29-2008

Signature/Incorporator

Date

9-29-2008