

N 09 000009398

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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MAIL

(Business Entity Name)

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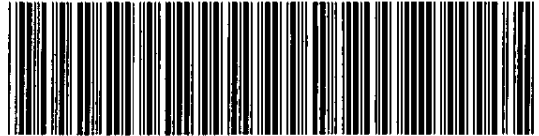
Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

9/8/09 Batchwork

Laise Mitchell **GAVE**
AUTHORIZATION BY PHONE TO
CORRECT Name, address, name, record
DATE 9-21-09
DOC. EXAM JS

Office Use Only



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09/11/09--01037--001 **35.00

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2009 SEP 25 AM 11:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. Shivers SEP 28 2009

229-40658
229-40829

COVER LETTER

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

SUBJECT:

Life Changing Ministries
(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:

Louise Mitchell
Name (Printed or typed)

3015 North East 19th Street
Address

Gainesville, Florida 32609
City, State & Zip

352 222-4011
Daytime Telephone number

Spiritualsister1@yahoo.com
E-mail address: (to be used for future annual report notification)

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

RECEIVED

2009 SEP -8 AM 8:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2009 SEP 25 AM 11:33

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

ARTICLE I NAME

The name of the corporation shall be: *New life beginning church Inc.*

ARTICLE II PRINCIPAL OFFICE

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

2725 SE. Hawthorne Rd

Gainesville FL 32641

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Religious - Physical Place of Worship

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:

Louise Mitchell

Appointed by Pastor

ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS

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

*Louise Mitchell (Pastor)
3015 N.E. 19th Street
Gainesville, Florida 32609*

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

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

*Louise Mitchell
3015 North East 19th Street
Gainesville, Florida 32609*

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

*Louise Mitchell
3015 North East 19th Street
Gainesville, Florida 32609*

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.

Louise Mitchell

Signature/Registered Agent

9/03/09

Date

Louise Mitchell

Signature/Incorporator

9/03/09

Date

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2009 SEP 25 AM 11:33

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