# N09000009725

(Requestor's Name)		
(Address)	700161116617	
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL	10/05/0901062012 **87.50	
(Business Entity Name)	Annual exists and an exist of the contract of	
(Document Number)		
Certified Copies Certificates of Status :	ence of the second of the seco	
Special Instructions to Filing Officer:	FILED  09 OCT -S PN 5: L	

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# **COVER LETTER**

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

SUBJECT: Divine Truth Connections withistness international, inc.  (PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)			
Enclosed is an original a	and one (1) copy of the Arti	cles of Incorporation and	a check for:
\$70.00 Filing Fee	Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate
		ADDITIONAL CO	PY REQUIRED
FROM:	Leslie Ann Daniel		
	Name (Pri	inted or typed)	-
P.O. Box 1006 Address			

Valrico, FL 33595

813 842-0900

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

E-mail address: (to be used for future annual report notification)

Divinetruthministries@gmail.com

City, State & Zip

Daytime Telephone number

### ARTICLES OF INCORPORATION

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

# ARTICLE I NAME

The name of the corporation shall be:

Divine Truth Connections Ministries International Inc.

#### ARTICLE II PRINCIPAL OFFICE

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

2034 Samantha Lane

Valrico, Florida 33594

# ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

to lead the lives of men, women, boys and girls from all walks of life to the place where their lives can become totally connected and established in the ways of Jesus Christ.

#### ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:

The officers were appointed by the organization's director.

# ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS

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

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

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

Leslie Ann Daniel

2034 Samantha Lane

Valrico, Florida 33594

#### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Leslie Ann Daniel

P.O. Box 1006

Valrico, Florida 33595

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

- Luli an Dariel

Signature/Incorporator

<u>September 12, 2009</u>

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Date

<u>September 12, 2009</u>

Date