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(Requestor's Name)

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(Address)

(City/State/Zip/Phone #)

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PICK-UP

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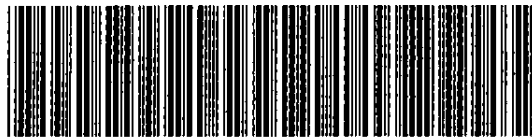
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FILED

2010 APR 26 A 10:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

01-88-10
cc

COVER LETTER

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

SUBJECT: Dr. Julia McMillan Ministries, 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: Dr. Julia M. McMillan
Name (Printed or typed)

314 Newberger Road
Address

Lutz, Florida 33549
City, State & Zip

813-380-4940
Daytime Telephone number

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

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

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

ARTICLE I NAME

The name of the corporation shall be:
Dr. Julia McMillan Ministries, INC.

ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is:
14413 N. Nebraska Avenue Tampa, Florida 33613

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

The mission of Dr. Julia McMillan ministries is to touch the lives of Christians and non Christians, locally, nationally and globally by the transforming power of Jesus Christ, discipling them to follow His example, and training them to minister to others.

Statement of purpose: Reaching them through the transforming power and love of Jesus Christ, Discipling them to follow christ's example and live overcoming lives, Building wholeness and balance, both spiritually and mentally, through consistent prayer and study of God's word. Providing and atmosphere for the development of their gifts, abilities and lasting relationships. Training them to find their places in the ministry and effectively touch their world for Christ.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:

As stated in the bylaws

ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS

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

Dr. Julia M McMillan, President
Rev Patricia McLeod, Vice president
Angela Boone, Treasurer
Alana Alford, Secretary

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

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

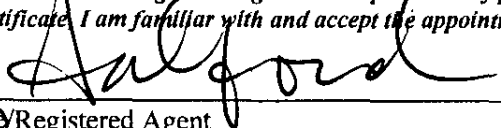
Alana Alford
10114 Post Harvest Drive
Riverview, Florida 33578

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Julia M McMillan
314 Newberger Road
Lutz, Florida 33549

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

4/21/10

Date



Signature/Incorporator

4/21/10

Date

FILED
2010 APR 26 A 10:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA