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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

10 JUL -7 AM 11:06

APPROVED
AND
FILED

PS 7/12/10

COVER LETTER

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

SUBJECT: Bethlehem Assisted Living and Orphanage Care Center 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: Ionie Barrett-Wilson
Name (Printed or typed)

3188 mw 43rd Street
Address

Lauderdale Lakes Florida 33309
City, State & Zip

954-865-3373
Daytime Telephone number

mitchionie@gmail.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:

Bethlehem Assisted Living and Orphanage Care Center Inc.

ARTICLE II PRINCIPAL OFFICE

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

3188 nw 43rd street
Lauderdale Lakes Fl. 33309

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Bethlehem Assisted Living and Orphanage Care Center, Inc.
will provide Housing, Food, Care, Counseling and Advocacy
for the elderly and teen.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:

In Council Meeting

ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS

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

Ionie Barrett-Wilson :President /CEO 3188 nw 43rd Street
Lauderdale Lakes Florida. 33309
Dr. Alexander Brissett: Aministrator 1008 Wyoming Avenue Fort Lauderdale Florida 33312
Annette Ball : Secretary 4920 nw 14 Street Lauderhill Florida 33313

ARTICLE VI INTIAL REGISTERED AGENT AND STREET ADDRESS

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

Ionie Barrett- Wilson
3188 nw 43rd Street Lauderdale Lakes Florida 33309

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Ionie Barrett- Wilson
3188 nw 43rd Street Lauderdale Lakes Florida 33309

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 famillar with and accept the appointment as registered agent and agree to act in this capacity.

Ionie Barrett-Wilson

Signature/Registered Agent

06/16/ 2010

Date

Ionie Barrett-Wilson

Signature/Incorporator

06/ 16/ 2010

Date

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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