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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DEC 03/2010

COVER LETTER

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

SUBJECT: Healing Wind 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: James H Pohle

Name (Printed or typed)

201 Pensacola Beach Rd. D-8

Address

Gulf Breeze, FL 32561

City, State & Zip

850-916-7098

Daytime Telephone number

healingwindmin@hotmail.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)

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2010 DEC 12 PM 3:50
STATE OF FLORIDA
TALLAHASSEE

ARTICLE I NAME

The name of the corporation shall be: Healing Wind Ministries, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address
201 Pensacola Beach Rd. D-8
Gulf Breeze, FL 32561

Mailing address, if different _____

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

The purpose for which the corporation is organized is to engage in any lawful act or activity for which corporations may be organized under the Florida Business Corporations Act of the State of Florida. This corporation shall be a nonprofit corporation, is organized as and at all times shall be operated exclusively for charitable, educational and scientific programs with the meaning of Section 501(c)(3) of the Internal Revenue Code, or the corresponding section of any future federal tax code.

ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected and appointed:

The manner in which the Directors are elected is by a majority of the members of the corporation at a meeting of the members of the corporation.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: James H Pohle, President
Address: 201 Pensacola Beach Rd. D-8
Gulf Breeze, FL 32561

Name and Title: Jeannie M Peace, Secretary, Treasurer
Address: 201 Pensacola Beach Rd. D-8
Gulf Breeze, FL 32561

Name and Title: Marcia Lowe, Board Member
Address: 4342 Crosswinds Dr
Milton, FL 3283

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: Jeannie M Peace
Address: 201 Pensacola Beach Rd. D-8
Gulf Breeze, FL 32561

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: James H Pohle
Address: 201 Pensacola Beach Rd. D-8
Gulf Breeze, FL 32561

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

Jeannie M. Peace
Required Signature of Registered Agent

December 1, 2010
Date

I submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

James H Pohle
Required Signature of Incorporator

December 1, 2010
Date