1100001579

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				

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TO DEC 10 PM 1: 23
SECRETARY DE STATE
MALLMANASSEE, BLORBIA

PS-12/15/10



November 30, 2010

TONY BRIDLEY 4461 OHIO AVE FT MYERS, FL 33905

SUBJECT: SEE HIS FACE OUTREACH CENTER INC.

Ref. Number: W10000055606

We have received your document for SEE HIS FACE OUTREACH CENTER INC. and your check(s) totaling \$79.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 617.0202(d), Florida Statutes, requires the manner in which directors are elected or appointed be contained in the articles of incorporation or a statement that the method of election of directors is as stated in the bylaws.

A corporation may not serve as its own registered agent. Please designate an individual or another active entity filed or registered with this office, having a Florida street address.

If you have any further questions concerning your document, please call (850) 245-6901.

Letter Number: 310A00027846

Pamela Smith Regulatory Specialist II New Filing Section

www.sunbiz.org

Division of Compactions D.O. DOV 6297 Wellshopes Florida 2921

COVER LETTER

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

SUBJECT: SEE HIS FACE DURCALL CENTER INCLUDE SUFFIX)

iclosed is an original	and one (1) copy of the Art	icles of Incorporation and	d a check for :
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy	S87.50 Filing Fee, Certified Copy & Certificate
		ADDITIONAL COPY REQUIRED	
		 	

FROM: Tony Bridley
Name (Printed or typed)

4461 Ohio Ove.

Address

Ft. Myerc Fl. 33405

Cirly. State & Zip

Daytime Telephone number

Bridly Fa yaloo. Con

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

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

ARTICLES OF INCORPORATIONIn compliance with Chapter 617, F.S., (Not for Profit)

ARTICLE I The name of the c	NAME corporation shall be: SEE HIS FACE	outreach	CENTER INC.
ARTÌCLE II	PRINCIPAL OFFICE		,
	Principal street address		Mailing address, if different is:
	3072 Fowler Street Pt Myers. Fl. 33916		
ARTICLE III	PURPOSE		
		be a Faith	based orginization primed At
bringing 5 he people	of this community to	view life	this community and asistal from a broader perspect
ARTICLE IV	-		ors are elected and appointed; + 60% of the Board of Directe
ARTICLE V	/ INITIAL OFFICERS AND/OR DIREC	•	
	litle: Tony Bridley - Pastora	Name and Tit	le: Ionio Bridly - Treasurer
Address:	Founder / President 4461 OHIO HVC Ft. MYCH F1. 33905	Address:	4441 011.0 P.de Ft. 133905
Name and T Address;	Title: Lonnetta Bridley - V.P. 4461 OHID AVE	Name and Tit Address:	He: Lean MARK - DB
	Ft. Myers Fl. 33905.		Lehigh Acres. fl. 33901
Name and T Address:	Title: Fransacca Bridley - Secrets 3415 crestupps LL are	Name and Tit Address:	4508 64 5t. W
	4-105 FI.Myers Flag 38901		Lehigh Acres Fl. 53901
ARTICLE VI	REGISTERED AGENT		
	lorida street address (P.O. Box NOT acceptable Towy Bridley 4461 OHIO AVE FLANGER Flo. 33905.	e) of the registered ag	gent is:
The name and ac	INCORPORATOR idress of the Incorporator is:		2
Name:	Tony Bridley		
Address;	4461 OHIO AVE FF. MYERS FI 33705		
	med as registered agent to accept service of p familiar with and accept the appointment as reg		e stated corporation at the place designated in this tree to act in this capacity
_ do	Required fignature of Registered Age	ent I Tracke of	a for 12/7/10
I submit this doc		ire true. I am aware .	that any false information submitted in a document
	SEE SIGNATINE ARME		
	SEF SIGNATURE ACOVE Required Signature of Incorpora	ator	Date