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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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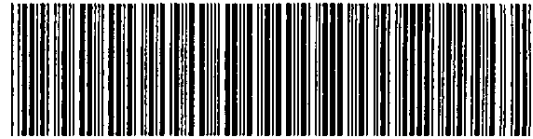
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE FLORIDA

MRS  
3/3

## COVER LETTER

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

SUBJECT: Words to Live by Christian 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: Calvin D. Williams

Name (Printed or typed)

8011 Cornwall Ln

Address

Tampa, Florida 33615

City, State & Zip

813-977-0877

8011 Cornwall Ln Telephone number

wtlbcc@yahoo.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**

Words to Live by Christian Center Inc  
The name of the corporation shall be:

### **ARTICLE II PRINCIPAL OFFICE**

Principal street address  
8011 Cornwall Ln  
Tampa, FL 33615

Mailing address, if different is:

### **ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:  
A Church. A worship center. Non-denominational.

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

Calvin Williams is the founder of the church. He appoints all officers/directors

### **ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Pastor Calvin Williams president and founder. Name and Title: \_\_\_\_\_  
Address: 8011 Cornwall Lane Address: \_\_\_\_\_  
Tampa, Florida 33615

Name and Title: Pamela Williams Secretary/Treasure Name and Title: \_\_\_\_\_  
Address: 8011 Cornwall Lane Address: \_\_\_\_\_  
Tampa, Florida 33615

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_ Address: \_\_\_\_\_

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SECRETARY OF STATE

### **ARTICLE VI REGISTERED AGENT**

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

Name: Calvin Williams  
Address: 8011 Cornwall Ln  
Tampa, Florida 33615

### **ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Pamela Williams  
Address: 8011 Cornwall Ln  
Tampa, FL 33615

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

*Calvin Williams*

Required Signature of Registered Agent

2/18/2011

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.

*Pamela Williams*

Required Signature of Incorporator

2/18/2011

Date