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PICK-UP	☐ WAIT	MAIL
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SECRETARY OF STATE
TALLAHASSEF FI DEID

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COYER BELLEN

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

SUBJECT: Metonoia Christian College (PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)

Enclosed is an original	and one (1) copy of the Artic	les of Incorporation and	d 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 C	OPY REQUIRED	
		••		
FROM:	Rev. Barton McIntyre Name (Pri	nted or typed)	_	
	(* * * * * * * * * * * * * * * * * * *	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
14785 Collier Blvd				
Address				
	Naples, Fl 34119			
City, State & Zip			_	
	239-353-9099			
14785 On liere Bevolhone number				
Bartonmci@gmail.com				

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

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



RECEIVED 11 MAR - I AM 8: 15

FLORIDA DEPARTMENT OF STATE FALLAHASSEE. FLORIDA Division of Corporations

February 9, 2011

REV. BARTON MCINTYRE 14785 COLLIER BLVD NAPLES, FL 34119

SUBJECT: METONOIA CHRISTIAN COLLEGE

Ref. Number: W11000007921

We have received your document for METONOIA CHRISTIAN COLLEGE and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name must contain a word that will clearly indicate that it is a corporation. This word may be: CORPORATION, CORP., INCORPORATED, or INC. Sections 617.0401(1)(a) and 617.1506(1), Florida Statutes, prohibits the use of the word COMPANY or CO. in the name of a non-profit corporation.

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.

The document must contain a registered agent with a Florida street address and a <u>signed</u> statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

You must list at least one incorporator with a complete business street address.

Section 607.0120(6)(b), or 617.0120(6)(b), Florida Statutes, requires that articles of incorporation be executed by an incorporator.

Please check your spelling of information listed in the purpose field.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6879.

Ruby Dunlap Regulatory Specialist II New Filing Section

Letter Number: 111A00003441

www.sunbiz.org

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314 -

ARTICLE I The name of the co	In compliance with Chapte NAME Metonoia Christian Col proporation shall be:		1140
ARTICLE II	PRINCIPAL OFFICE Principal street address 14785 Collier Blvd.		SECRETARY Editornis: Marting Address Electronics
	Naples, Fl 34119	<u> </u>	
ARTICLE III	PURPOSE		
and apprentic education.	hich the corporation is organized is: Il Christian College to educate and preship program with degrees given fro	m Bachelor of	Arts to Doctors of Christian
ARTICLE IV Appointed	MANNER OF ELECTION The manner in	which the directors	are elected and appointed:
ARTICLE V	INITIAL OFFICERS AND/OR DIRECTO	rs	
Name and Ti	itle:Rev. Barton McIntyre, President	Name and Title:	
Address:	14785 Collier Blvd	_ Address: _	
	Naples, Fl 34119	<u>-</u> 	
Name and Ti Address:	itle:Mrs Wendy McIntyre, Dean 14785 Collier Blvd. Naples, Fl 34119	Name and Title: Address:	
Name and Ti Address:	itle:Mrs Rachel Owen, Officer 2200 Santa Barbara Blvd	Name and Title: Address:	
	Naples, Fl 34116	<u> </u>	
ARTICLE VI	REGISTERED AGENT		
The name and Flo	rida street address (P.O. Box NOT acceptable) of	f the registered agen	t is:
Name:	Rev. Barton McIntyre 14785 Collier Blvd	<u>-</u>	
Address:		-	
	Naples, Florida	_ _	
ARTICLE VII	INCORPORATOR		
	Iress of the Incorporator is: Rev. Barton McIntyre		
Name: Address:	14785 Collier Blvd	_	
	Naples, Fl 34119	- -	
		_	
Having been name	ed as registered agent to accept service of proce	ss for the above st	ated corporation at the place designated in this

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.

the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Required Signature of Incorporator

Required Signature of Registered Agent

certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

2/17/11 Date

Date

2/17/11