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SEGRETARY OF STATE

MR) 3/23

## **COVER LETTER**

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

SUBJECT: BETHESDA EVANGELICAL CHURCH 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 :

Certified Copy & Certificate

\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 X Filing Fee, Certified Copy & Certificate
		ADDITIONAL C	OPY REQUIRED
<b></b>			
FROM:	Rev. CHRISTEL MI Name (Pri	CHEL nted or typed)	<del></del>
	752 SE Whitehurs	t Avenue dress	_
	Port St Lucie, F.	L 34983 tate & Zip	<del></del>
	(772) 873-1701;		
	Daytime Tel	ephone number	

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

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

michelchristel22@yahco.com

## ARTICLES OF INCORPORATION

In compliance with Chapter 617, F.S., (Not for Profit)

he name of the o	NAME corporation shall be: BETHESDA EVANGEL	ICAL CHURC	H MINISTRIES, INC.
RTICLE II	PRINCIPAL OFFICE		
	Principal street address		Mailing address, if different is:
	752 SE Whitehurst Avenue	<del>-</del>	
	Port St Lucie, FL 34983	_ :	
RTICLE III	PURPOSE		
womer with	which the corporation is organized is: Preach to meeting their physical but discrimination. Provide ention againt drugs and tead	, social a assistanc	nd educational needs e to the young people as
RTICLE IV	MANNER OF ELECTION The manner in	which the directors	s are elected and appointed:
They	are elected and appointed h	ov vote of	the congregation members.
RTICLE V	INITIAL OFFICERS AND/OR DIRECTO	PS.	
	Title: Rev. Christel Michel(P)	Name and Title	: 752 se whitehorst Avenue
	752_SE_Whitehurst Awenue Port St Lucie, FL 34983	_ Address: _	Port St Lucie, FL 34983
Name and	Title: Devilma Vincent (VP)	<ul> <li>Name and Title</li> </ul>	Cleodile Hector (D)
Address &	13 <del>SW Abode Drive</del>		2 SE Midtown Road
Pc	ort St Lucie, FL 34953		St Lucie, FL 34985
Name and	Ninotte Osias (D)	- Nome and Title	Benoit Chevalier
Address:	1988 SW Providence St. ort St Lucie, FL 34953	Address: 534	Sw Eagle Street
•	ort bt hacre, in 54955	<del>-</del>	Port St Lucie, FL 34953
	REGISTERED AGENT		
	lorida street address (P.O. Box NOT acceptable) of	f the registered age	nt is:
Address: 7	v. Christel Michel 52 SE Whitehurst Avenue	_	三 三
	Port St Lucie, FL 34983	<del></del> 	
	<del></del>	_	至 2
RTICLE VII	INCORPORATOR		59.50
	Idress of the Incorporator is:		WALL STATE
Name:	CHRISTEL MICHEL	_	777
Address:	752 SE Whitehurst Avenue	<del>-</del>	
	Port St Lucie, FL 34983	<b>-</b>	過点の
	med as registered agent to accept service of proce familiar with and accept the appointment as register		e to act in this capacity
<u></u>	Required Signature of Registered Agent	· · · · · · · · · · · · · · · · · ·	$\frac{3-16-2011}{\text{Date}}$
	ument and affirm that the facts stated herein are tr to of State constitutes a third degree felony as provid		; F.S.
	(Kristeldickel)		3-16-2011
	Required Signature of Incorporator		Date

## INITIAL OFFICERS AND/OR DIRECTORS

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Name and Title: Rev. Christel Michel , President

Address: 752 SE Whitehurst Avenue Port St Lucie, FL 34983

SECRETARY OF STATES

Name and Title: Devilma Vincent, Vice-President

Address 643 SW Abode Drive

Port St Lucie, FL 34953

Name and Title: Ninotte Osias, Secretary (Director)

Address: 1988 SW Providence St

Port St Lucie, FL 34953

Name and Title: Rose N. Michel, Director

Address: 752 SE Whitehurst Avenue Port St Lucie, FL 34983

Name and Title: Cleodile Hector, Director

Address: 2222 SE Midtown Road

Port St Lucie, FL 34985

Name and Title: Benoit Chevalier, Director

Address: 4634 SW Eagle Street

Port St Lucie, FL 34953

Two surplus names are:

Name and Title: Vesta Briphil, Director

Address: 965 SW Soneto Court

Port St Lucie, FL 34983

Name and Title: Marie Vincent, Director

Address: 643 SW Abode Drive

Port St Lucie, FL 34953