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DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

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DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

V/N

## COVER LETTER

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

SUBJECT: Kingdom Life Tabernacle, 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: Otis B. Young  
Name (Printed or typed)

2532 W. Tharpe St.  
Address

Tallahassee, FL 32303  
City, State & Zip

(850) 510-9142  
Daytime Telephone number

joshay@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**

The name of the corporation shall be: Kingdom Life Tabernacle, Inc.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address  
2532 W. Tharpe St.  
Tallahassee, FL 32303

Mailing address, if different is:  
\_\_\_\_\_  
\_\_\_\_\_

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

To minister to the whole man through "out of the box"  
but in the book Kingdom strategies, which empower  
individuals to serve God through their spiritual gifts &  
talents for the advancement of the Kingdom

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

Appointed by the president

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

Name and Title: Otis B. Young, president  
Address: 8231 Balmoral Dr.  
Tallahassee, FL 32311

Name and Title: Pastor Toni Hannah  
Address: P.O. Box 481  
Quincy, FL 32353

Name and Title: Patricia Edwards  
Address: 703 Coble Dr.  
Tallahassee, FL 32301

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: Michelle B. Young  
Address: 8231 Balmoral Drive  
Tallahassee, FL 32311

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Otis B. Young  
Address: 2532 W. Tharpe St.  
Tallahassee, FL 32303

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

[Signature]  
Required Signature of Registered Agent

4/19/11  
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.

OB Young  
Required Signature of Incorporator

4/19/11  
Date

FILED  
11 APR 19 PM 4:30  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA