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Special Instructions to Filing Officer:

ELLERY D. CAVE GAVE

AUTHORIZATION BY PHONE TO

CORRECT ARTICLE-5 ^{with Complete} _{Address}

DATE 5-25-11

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2011 MAY 24 PM 2:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SC 5/27

Original

COVER LETTER

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

SUBJECT: GENESIS MINISTRY OF BIBLICAL EDUCATION AND KINGDOM COUNSELING, 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: ELLERY D. CAVE, SR
Name (Printed or typed)

431 WEST CENTER STREET
Address

STARKE, FLORIDA 32091
City, State & Zip

904-769-2188
Daytime Telephone number

dredcsr01@yahoo.com
E-mail address: (to be used for future annual report notification)

2011 MAY 24 PM 2:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
FILED

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: **GENESIS MINISTRY OF BIBLICAL EDUCATION AND KINGDOM Counseling, INC.**

ARTICLE II PRINCIPAL OFFICE

Principal street address
431 west center street
Starke, Florida 32091

Mailing address, if different is:

none

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Our Mission is to come along side of our brothers and sisters in the Lord, as well as at large Ministries, on an as needed basis, so as to provide foundational bible solutions that are practically useful with assisting each family member as well as each parishioner with tapping into their destiny and call to ministry. We believe that Psychology and human development is a vital component of spiritual development and we aim to provide life assistance using foundational bible solutions along with our life experience, and the Word of God as we assist each individual in becoming the best that they can be in the lord.

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: Ella Brown, secretary/instructor
Address: 431 West Center Street
Starke, FL 32091

Name and Title: _____
Address: _____

Name and Title: Alicia West, Treasurer
Address: 431 West Center Street
Starke, FL 32091

Name and Title: _____
Address: _____

Name and Title: Dr. Ellery D. Cave, Sr. President
Address: 431 West Center Street
Starke, FL 32091

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: Ellery D. Cave, Sr.
Address: 431 West Center Street
Starke, FL 32091

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Ellery D. Cave, Sr.
Address: 431 West Center Street
Starke, FL 32091

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

Ellery D. Cave
Required Signature of Registered Agent

5-23-11

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.

Ellery D. Cave
Required Signature of Incorporator

5-23-11

Date

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2011 MAY 24 PM 2:38
TALLAHASSEE, FLORIDA
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