

N/1000006714

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

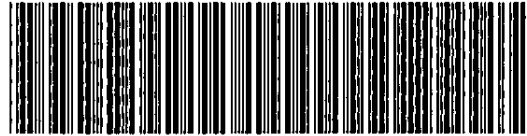
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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OFFICE OF THE STATE
FALL AND SPRING
FLORIDA

11 JUL 13 PM 1:06

FILED

07/15/11

W11-34889



RECEIVED

11 JUL 13 AM 10:18

FLORIDA DEPARTMENT OF STATE
Division of Corporations

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

June 29, 2011

WILSON MUSIC MINISTRIES
5128 BRADENTON ROAD
SARASOTA, FL 34234

SUBJECT: WILSON MUSIC MINISTRIES
Ref. Number: W11000034889

We have received your document for WILSON MUSIC MINISTRIES 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.

The title(s) in the officer/director field(s) is/are not acceptable. Please refer to the following link for acceptable officer/director title information.
<http://www.sunbiz.org/titledef.html>.

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) 245-6949.

Thomas Chang
Regulatory Specialist II
New Filing Section

Letter Number: 311A00015698

COVER LETTER

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

SUBJECT: Wilson Music Ministries
(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: Wilson Music Ministries
Name (Printed or typed)

5128 Bradenton Road
Address

Sarasota, Florida 34234
City, State & Zip

941-225-1962
Daytime Telephone number

wilsonmusicministries@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 Wilson Music Ministries, Inc.
The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE
Principal street address _____ Mailing address, if different is: _____
5128 Bradenton Road _____
Sarasota, Florida 34234 _____

ARTICLE III PURPOSE
The purpose for which the corporation is organized is:
Said corporation is organized exclusively for charitable, educational purposes, including, for such purposes, the making of distributions to organizations that qualify as exempt organizations under section 501(c)(3) of the Internal Revenue Code, or the corresponding section of any future federal tax code.

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: Maurice D. Wilson, President Name and Title: Aito Steele, Sec. 1
Address: 5128 Bradenton Rd Address: 1507 # 1 29th St.
Sarasota, FL 34234 Sarasota, FL 34234

Name and Title: Shanda Obi, officer Name and Title: _____
Address: 2005 Dwyer High View Pk Address: _____
Bradenton, FL 33510

Name and Title: _____ Name and Title: _____
Address: _____ Address: _____

ARTICLE VI REGISTERED AGENT
The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:
Name: Maurice D. Wilson
Address: 5128 Bradenton Road
Sarasota, Florida 34234

ARTICLE VII INCORPORATOR
The name and address of the Incorporator is:
Name: Maurice D. Wilson
Address: 5128 Bradenton Road
Sarasota, Florida 34234

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

Maurice D. Wilson _____ Date June 8, 2011
Required Signature of Registered Agent

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.

Maurice D. Wilson _____ Date June 8, 2011
Required Signature of Incorporator

11 JUL 13 PM 4:06
DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA