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(Re	questor's Name)
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PICK-UP	☐ WAIT	MAIL
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FLORIDA DEPARTMENT OF STATE Division of Corporations

RECEIVED 11 AUG 12 PM 1: 26

SECRETARY OF STATE TALLAHASSEE. FLORIDA

April 19, 2011

MICHAEL D. HOLMES 3540 N.W. 206 ST. MIAMI GARDENS, FL 33056

SUBJECT: HEALING HOUSE MINISTRIES

Ref. Number: W11000021895

We have received your document for HEALING HOUSE MINISTRIES and your check(s) totaling \$87.50. 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 purpose contained in your articles of incorporation should be more specific. Please correct your articles to reflect the specific purpose for which the non profit corporation is being organized.

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.

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: 411A00009479

COVER LETTER

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

SUBJECT: HEAling House Ministries, INC.				
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u> I	<u>UDE SUFFIX</u>)	
Enclosed is an original a	nd one (1) copy of the Art	icles of Incorporation and	d a check for :	
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of	\$78.75 Filing Fee & Certified Copy	887.50 Filing Fee, Certified Copy	
	Status		& Certificate	
	e i i i i i i i i i i i i i i i i i i i	ADDITIONAL C	OPY REQUIRED	
FROM:	Michael D Name (P	. Holmes	_	
	Name (P	rinted or typed)		
	3540 N.W. 20	6 st	_	
		Address		
	Milmi Grafer City,	15 FT. 3345 State & Zip	_	
	786 - 269 - 9 Daytime T	44/3	_	
E	mikeholmes and address: (to be used for	future annual report notificat	tion)	

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

ARTICLES OF INCORPORATIONIn compliance with Chapter 617, F.S., (Not for Profit)

Address: Address: 3544 N.W. 106 5	Mailing address, if different is:
RTICLE III PURPOSE e purpose for which the corporation is organized is: REACHING OUT TO THE LEAST AND LIST IN CON COMMUNITY, The word of God by Providing Social Skills, teaching and serving the youth through intervention pragrams Such RTICLE IV MANNER OF BLECTION The manner in which the directors are elec Noted tors Were appointed by the CEO/President. RTICLE V INITIAL OFFICERS AND/OR DIRECTORS Name and Title: Michael Hilmes / President Name and Title: Address: 3540 N.W. 206 \$\frac{3}{2} \text{ Name and Title: Address: Name and Title: Kinderly Holae, Vice President Name and Title: Address: 3540 N.W. 206 \$\frac{3}{2} \text{ Address: Address: Niami Garden, Fl. 3347 RTICLE VI REGISTERED AGENT to name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: Name: Velonic Manshi Address: 1663 N.W. 885 Niami Fl. 3347 RTICLE VII INCORPORATOR to name and address of the Incorporator is: Name: Michael Holaes Address: 3540 N.W. 206 \$\frac{3}{2} \text{ Niami Gardens} \text{ Fl. 3347} RTICLE VII INCORPORATOR to name and address of the Incorporator is: Name: Michael Holaes Address: 3540 N.W. 206 \$\frac{3}{2} \text{ Niami Gardens} \text{ Fl. 3347} RTICLE VII INCORPORATOR to name and address of the Incorporator is: Name: Michael Holaes Address: 3540 N.W. 206 \$\frac{3}{2} \text{ Niami Gardens} \text{ Fl. 3305} Name: Michael Holaes Address: 3540 N.W. 206 \$\frac{3}{2} \text{ Niami Gardens} \text{ Fl. 3305} Name and address of the Incorporator is: Name: Michael Holaes Address: 3540 N.W. 206 \$\frac{3}{2} \text{ Niami Gardens} \text{ Fl. 3305} Name and address of the Incorporator is: Name: Michael Holaes Address: 3540 N.W. 206 \$\frac{3}{2} \text{ Niami Gardens} \text{ Fl. 3305} Name and address of the Incorporator is: Name: Michael Registered agent to accept service of process for the above stated contificated, I am familiar with and accept the appointment as registered agent and agree to act it	
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REACHING OUT TO THE LEAST AND LIST IN OUT COMMUNITY, the word of God by Providing social skills, teaching and serving the youth through intervention programs such intervention programs such intervention programs such the directors were appointed by the CEO/president. RITICLE V INITIAL OPTICERS AND/OR DIRECTORS Name and Title: Michael Hillings President Name and Title: Address: Name and Title: Kimberly Holac, Vice President Name and Title: Address: Niami Lavisna Fl. 33056 Name and Title: Shekita William Sec. Treasurge Name and Title: Address: Niami Godfra Fl. 33056 Name and Title: Shekita William Sec. Treasurge Name and Title: Address: Niami Fl. 33177 RICLE VI REGISTERED AGENT Ename and Florida street address (P.O. Box NOT acceptable) of the registered agent is: Name: Veronia Marrish Address: IKB3 N.W. 885 Niami Fl. 33171 RICLE VII INCORPORATOR Ename and address of the Incorporator is: Name: Michael Holaci Address: 3548 N.W. 2068 Niami Gardens Fl. 53056	
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Address: Address:	
Name and Title: KINDLING HOLDS, VICE PRESIDENT Name and Title: Address: Name and Title: Shek. h. Williams Sec. tyee Surge Name and Title: Address: Name and Title: Shek. h. Williams Sec. tyee Surge Name and Title: Address: Name and Title: Shek. h. Williams Sec. tyee Surge Name and Title: Address: Name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: Name: Name: Vecenica Macrisia Address: Name: Vecenica Macrisia Address: Name: Michael Holmes Address: Name: Michael Holmes Address: 3546 N.W. 885 MIAMI Fl. 33147 RTICLE VII INCORPORATOR The name and address of the Incorporator is: Name: Michael Holmes Address: 3546 N.W. 2065 Name: Michael Holmes M. Sand Sec. to the above stated confiscated for named as registered agent to accept service of process for the above stated confiscated, I am familiar with and accept the appointment as registered agent and agree to act in	
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Required Signature of Registered Agent	Date
ibmit this document and affirm that the facts stated herein are true. I am aware that any fa	se information submitted in a document
he Department of State constitutes a third degree felony as provided for in s.817.155, F.S.	эс неучиншим эминики и и ижитен