

N11000009078

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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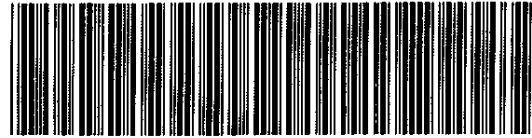
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SEP 23 11 55 AM
TALLAHASSEE, FLORIDA

κ 09/27/11

COVER LETTER

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

SUBJECT: **BREAKIN THE CYCLE ENDTIME MINISTRIES INC**
(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)

EIN: 45-3180877

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: Derrick B. Roberts
Name (Printed or typed)

4450 Cassius
Address

Orlando FL 32811
City, State & Zip

407-437-2876
Daytime Telephone number

btcetministries@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:

BREAKIN THE CYCLE ENDTIME MINISTRIES INC

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

4450 Cassius Street

Orlando FL 32811

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

The specific and primary purpose which this church is formed is to lead individuals and families to Jesus Christ and enable them to walk in daily fellowship with God through his son (Jesus Christ). The General purpose for which this church is organized is exclusively religious, charitable, and to meet the physical, emotion, and spiritual needs of anyone who is hurting through the ministry of the Holy Spirit.

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

Is set forth in BREAKIN THE CYCLE ENDTIME MINISTRIES INC BY-LAWS

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Derrick B. Roberts CEO/President

Address: 4450 Cassius Street

Orlando FL 32811

Name and Title: Shantia Wilson Treasurer

Address: 4450 Cassius Street

Orlando FL 32811

Name and Title: Alisia Roberts Vice President

Address: 4450 Cassius Street

Orlando FL 32811

Name and Title: Rodarius Wilson Trustee

Address: 4450 Cassius Street

Orlando FL 32811

Name and Title: Alex Hill Secretary

Address: 4450 Cassius Street

Orlando FL 32811

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: Derrick B Roberts

Address: 4450 Cassius Street

Orlando FL 32811

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Derrick B Roberts

Address: 4450 Cassius Street

Orlando FL 32811

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

Derrick B. Roberts

Required Signature of Registered Agent

9/15/2011

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.

Derrick B. Roberts

Required Signature of Incorporator

9/15/2011

Date

RECEIVED
11 SEP 23 AM 9:55
ALLIANCE FLORIDA