

N11000009123

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

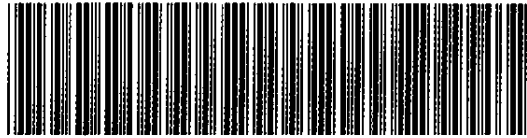
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W11-47395

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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AND
FILED

W

COVER LETTER

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

SUBJECT: He Increase - I Decrease Ministry, Inc.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)
(HI-ID Ministry, Inc.)

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: Betty Richardson
Name (Printed or typed)

P.O. Box 592
Address

Chattahoochee, FL 32324
City, State & Zip

(850) 663-4124
Daytime Telephone number

E-mail address: (to be used for future annual report notification)

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 14, 2011

BETTY RICHARDSON
P.O. BOX 592
CHATTAHOOCHEE, FL 32324

SUBJECT: HE INCREASE - I DECREASE MINISTRY, INC. (HI-ID MINISTRY, INC.)
Ref. Number: W11000047395

We have received your document for HE INCREASE - I DECREASE MINISTRY, INC. (HI-ID MINISTRY, INC.) and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Entities may file using only the entity's name. Please delete any reference to the "doing business as name" in your document. If you wish to register your fictitious name, you may do so by filing an application and submitting the appropriate fees to this office.

Please list the complete principal address for the 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) 245-6962.

Valerie Herring
Regulatory Specialist II
New Filing Section

Letter Number: 011A00021284

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

ARTICLE I NAME

The name of the corporation shall be: He Increase - I Decrease Ministry, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

1447 Briar Street
Chattahoochee, FL
32324

Mailing address, if different is:

He Increase - I Decrease Ministry, Inc.
P. O. Box 592
Chattahoochee, FL 32324

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Bible based, Christian oriented, outreach ministry. To make an effort to reach those who feel the least of them all. Those on the street, the lonely, the hungry, etc. Reach and minister to not only the church; extend beyond the walls of the church buildings. Mentor and counsel others. Give kind deeds and words of encouragement. Enhance skills and motivate others whenever possible. This should be a team effort. Partner with other ministries when necessary to feed the hungry, give clothing, etc.

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

Directors/officers will be appointed by the President and Ministry Members AS
agreed upon.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Beth Richardson, President

Address: P. O. Box 592
Chattahoochee, FL 32324

Name and Title: Rev. Kenneth Carroll

Address: Vice President
1690 NW Dennis Green Rd
Bristol, FL 32321

Name and Title: Mr. Elton Smith, Clerk

Address: 1708 Monticello Dr.
Tall., FL 32303

Name and Title: Rev. Willie Green

Address: Treasurer
15261 NW Willie Green Rd.
Bristol, FL 32321

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: Beth Richardson
Address: 1447 Briar Street
Chattahoochee, FL 32324

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Beth Richardson
Address: P. O. Box 592
Chattahoochee, FL 32324

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

Beth Richardson

Required Signature of Registered Agent

09/22/2011

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.

Beth Richardson

Required Signature of Incorporator

09/22/2011

Date

11 SEP 26 PM 4:31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED