## N11000009124

(Requestor's Name)				
(Address)				
(Address)				
(Ci	ity/State/Zip/Phor	ne #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificate	es of Status		
Special Instructions to Filing Officer:				
:				

Office Use Only



000212221460

09/26/11--01045--010 \*\*78.75

SECRETARY OF SIXIE

11 SEP 26 PH 4: 41



## **COVER LETTER**

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

SUBJECT: Westside Ministries Christian Academy & Bible Institute, Inc. (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is an original a	and one (1) copy of the Artic	eles of Incorporation and	I a check for :		
☐ Filing Fee	Filing Fee & Certificate of Status	Filing Fee & Certified Copy	Filing Fee, Certified Copy & Certificate		
		ADDITIONAL C	OPY REQUIRED		
FROM:	Rosalee Thomas	nted or typed)	<del>_</del>		
Name (Printed or typed)  1115 Princeton Drive					
Address					
Clermont, Fl 34711					
City, State & Zip					
352-394-4800					
	Daytime Telephone number				
westsideministriesbi@gmail.com					

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

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

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

	orporation shall be:		
ARTICLE II	PRINCIPAL OFFICE Principal street address		Mailing address, if different is:
	505 Cascading Creek Lane		P.O. Box 783591
	Winter Garden		Winter Garden
	FL 34787		FL 34778
ARTICLE III	PURPOSE		
The purpose for w	which the corporation is organized is:		
Includes but	not limited to the following: spreadir	ng the Christian	gospel through education and
			entary and high school courses, college
	, and certificate programs for adults		, ,
ARTICLE IV	MANNER OF ELECTION The manner	in which the directo	ors are elected and appointed:
A meeting an	nd the officers voluntarily appointed.		
ARTICLE V	, , , ,		
	<del></del>		e: Lemauzily Thomas - Officer
Address:	505 Cascading Creek Lane	Address:	215 Peasant Hill Drive
	Winter Garden		Clermont, FL 34711
	FL 34787	<del></del>	
Name and T	itle:Rosalee Thomas- Administrator	Name and Titl	le: Marie Burrell - Officer
Address:	1115 Princeton Drive		1117 Princeton Drive
	Clermont, FL 34711	<del></del>	Clermont, FL 34711
			le:
Address:	505 Cascading Creek Lane	Address:	
	Winter Garden, FL 34787	<del></del>	
ADDICE DE		<del></del>	
The name and Flo	REGISTERED AGENT  prida street address (P.O. Box NOT acceptable)	) of the registered ag	ent is:
Name:	Ann Maree Wittock-Brown	) of the registered up	on is.
Address:	505 Cascading Creek Lane		
	Winter Garden, FL 34787		
		<del>4. 1</del>	<b>∀</b> o ≡
ARTICLE VII	INCORPORATOR		
***************************************	dress of the Incorporator is:		
Name:	Rosalee Thomas		SA CA
Address:	1115 Princeton Drive		
	Clermont, FL 34711		mh R
			유왕 <b>:</b>
Having been nam	ned as registered agent to accept service of pro	ocess for the above	stated corporation at the place designated in this
certificate, I am fa	miliar with and accept the appointment as regis	stered agent and agr	ree to act in this capacity
A			9/11/11
	Required Signature of Registered Agen	T.	Date
			that any false information submitted in a document
to the Department	of State constitutes a third degree felony as pro	vided for in s.817.15	55, F.S.
R thene	n. l		9/11.
1/V/w/M			

Required Signature of Incorporator