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(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
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11 OCT 26 AM 10: 00
SECRETARY OF STATE.
ALLAHASSEE, FISHE.

MRD 10/27

COVER LETTER

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

SUBJECT:	LAST DAY MESSAGE, INC.
	(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)

FROM: Jesse L. Dallew Part

Name (Printed or typed)

401 E. Columbus Dr.

Address

Tampa, Fl. 33602

City, State & Zip

B13 - 846-3940

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.



September 28, 2011

JESSE L. DAVENPORT 401 E COLUMBUS DR TAMPA, FL 33602

SUBJECT: LAST DAY MESSAGE, INC.

Ref. Number: W11000049989

We have received your document for LAST DAY MESSAGE, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of a voluntarily dissolved business entity. The name of a voluntarily dissolved business entity is not available for the assumption or use by another entity until 120 days after the effective date of dissolution unless the dissolved business entity provides the Department of State with an affidavit or letter, stating that they have no intention of revoking the dissolution, therefore, releasing the name for use to another entity.

You must list the corporation name in Article I of the form.

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.

You must list at least one incorporator with a complete business street address.

Section 607.0120(6)(b), or 617.0120(6)(b), Florida Statutes, requires that articles of incorporation be executed by an incorporator.

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) 245-6879.

Ruby Dunlap

Regulatory Specialist II New Filing Section

Letter Number: 311A00022431

Last Day Message

401 .E. Columbus Dr. Tampa, FL 33602

Church: (813) 442-8283 • Fax: (813) 442-8291

Email: the last message@gmail.com

FILED

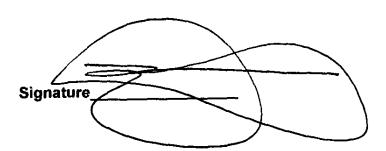
11 OCT 26 AM IO: 00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

AUGUST 15, 2011

TO WHOM IT MAY CONCERN

I <u>JESSE L. DAVENPORT</u>, am writing to inform you that I absolutely have no intention to reinstate the corporation <u>Last Day Message Inc. P10000014589</u>.



ARTICLES OF INCORPORATION

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

FILED

ARTICLE I The name of the cor	NAME poration shall be: LAST DAY M	ESSAGE,	INC.	11 OCT 26 AH 10: 00
	<u>PRIN</u> CIPAL OFFICE			TALLANTARY OF STATE
AKTICUS II	Principal street address LASIDAY NESSAUGILL LOIE: COLUMBUS D TAMPA, FL 33602	(C. E.	Mailin	ng address, if different is LORIDA
ARTICLE III	PURPOSE			
Is organized in Christ. To m	ich the corporation is organized is: is (are): to bring others to the knowle ature the body of Jesus Christ by Radi service, book stores, ordaining ministe	o, Television,	Christian So	or Jesus chool praise
ARTICLE IV	MANNER OF ELECTION The manner in v	which the directors	are elected and	appointed:
BUV	ote			
ARTICLE V	INITIAL OFFICERS AND/OR DIRECTOR			
Name and Titl Address:	PRESIDENT DAVENPOR PRESIDENT 401 B. CORUMBUS DR TAMPA, FL 33603	Name and Title: Address:		
Name and Titl Address:		Name and Title: Address:		
Name and Titl Address:	le:			
ADDICE ET	TROYOMBRE ACTIVE	·	·· — — —	
	REGISTERED AGENT ida street address (P.O. Box NOT acceptable) of	the registered agent	ie.	
Name: Address:	JUSSEL, DANSWPARI 401 E. CULUMBUS DRIVE. TOMPO, FL 3360		. 13.	
ARTICLE VII	<u>INCORPORATOR</u>			
The <u>name and addr</u> Name: Address:	Sesse L. Daven po. 401 E. Columbus D. Tampa, FC 33602	rt c,		
Having be on na med certificate, I am fam	l as registered agent to accept service of proces Hiar with and accept the appointment as registere	s for the above sta d agent and agree	ated corporation to act in this cap	n at the place designated in this pacity
	Required Signature of Registered Agent		X,	Sept 20 jac/
submit this docume to the Department of	ent and affirm that the facts stated herein are tru State constitutes a third degree felony as provide	e. I am aware that d for in s.817.155,	t any false infor F.S.	rmation submitted in a document

Required Signature of Incorporator