

N12000002235

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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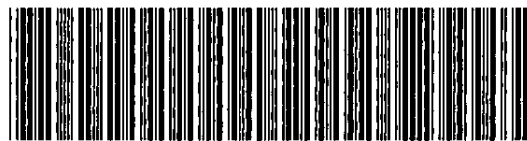
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. Shivers FEB 29 2012

COVER LETTER

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

SUBJECT: Better Life Community Outreach Ministries, Inc
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

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: TAMMIE TAFT
Name (Printed or typed)

2212 BRIAN LAKES DRIVE EAST
Address

JACKSONVILLE, FLORIDA 32221
City, State & Zip

904-477-4860
2212 BRIAN LAKES DRIVE EAST
Phone Number

TAMMIETAFT@AOL.COM

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

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TALLAHASSEE, FLORIDA

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: **BETTER LIFE COMMUNITY OUTREACH MINISTRIES, INC.**

ARTICLE II PRINCIPAL OFFICE

Principal street address
2212 BRIAN LAKES DRIVE EAST
JACKSONVILLE FLORIDA 32221

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TO SPREAD THE TEACHING GOSPEL OF JESUS CHRIST IN OUR CITY, STATE, COUNTRY AND SURROUNDING NATIONS; THROUGH TEACHING, PREACHING, LEADERSHIP, TRAINING, OUTREACH AND OTHER ASPECTS OF MINISTRY WITHIN THE KINGDOM OF GOD.

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

EACH ELECTED DIRECTOR WILL BE APPOINTED BY THE OFFICERS DURING ANNUAL MEETING.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: ANTONIO TAFT, PRESIDENT
Address: 2212 BRIAN LAKES DRIVE EAST
JACKSONVILLE FLORIDA 32221

Name and Title: _____
Address: _____

Name and Title: TAMMIE TAFT, VICE PRESIDENT
Address: 2212 BRIAN LAKES DRIVE EAST
JACKSONVILLE FLORIDA 32221

Name and Title: _____
Address: _____

Name and Title: FELTINA L. WILLIAMS, SECRETARY TRESURER
Address: 8030 OLD KINGS RD. S. #91
JACKSONVILLE FLORIDA 32217

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: TAMMIE TAFT
Address: 2212 BRIAN LAKES DRIVE EAST
JACKSONVILLE FLORIDA 32221

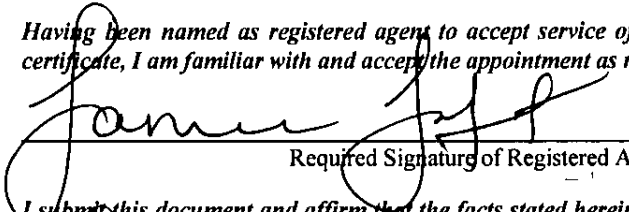
ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: TAMMIE TAFT
Address: 2212 BRIAN LAKES DRIVE EAST
JACKSONVILLE FLORIDA 32221

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TALLAHASSEE, FLORIDA

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


Required Signature of Registered Agent

2/27/2012

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.


Required Signature of Incorporator

02/27/2012

Date