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(Reque	stor's Name)	
(Addres	SS)	 -
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(City/St	ate/Zip/Phone #)	
PICK-UP	WAIT	MAIL
(Busine	ss Entity Name)	
(Docum	ent Number)	
Certified Copies	Certificates of S	Status
Special Instructions to Filing	g Officer:	GAVE
AUTHORIZATIO	·	E TO
CORRECTOU	realors	
DATE_TIN	112	100-
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COVER LETTER

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

\$70.00

Filing Fee

SUBJECT: KINGDOM WEALTH BUILDERS, INC
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

\$78.75

Filing Fee

& Certified Copy

\$87.50

ADDITIONAL COPY REQUIRED

Filing Fee, Certified Copy

& Certificate

Enclosed is an original and one (1) copy of the Articles of Incorporation and a check for :

\$78.75

Status

Filing Fec &

Certificate of

FROM: ALBER L. JONES
Name (Printed or typed)
1423 SERISSA CT.
Address
ORLANDO, FLORIDA 32818 City, State & Zip
407-690-0178
1423 SERASBACTelephone number
jones.al/cfl.rr.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 The name of the o	NAME KINGDOM, WEALTH BU	JILDERS, INC		
ARTICLE II PRINCIPAL OFFICE Principal street address 1423 SERISSA CT ORLANDO, FLORIDA 32818		•	Mailing address, if different is:	
			ORLANDO, FLORIDA 32818	
ARTICLE III	PURPOSE			
The purpose for v	which the corporation is organized is:			
	tion is organized exclusively for cha and financial education.	aritable purposes	s, including home buying trainin	ng,
ARTICLE IV	MANNER OF ELECTION The manner	er in which the directors	s are elected and appointed:	
A minimum o	of 8 officers/directors shall be nomin	nated & selected	by the advisory group.	
ARTICLE V	INITIAL OFFICERS AND/OR DIREC	TORS	, , , , ,	
	Fitle: Eben Slater, President		:Louis Bell, Treasurer	
Address:	31 Pershing Place Orlando, Florida 32805	Address:	5036 Dr Phillips Blvd	
	Oriando, Florida 32805		Orlando, Florida 32819	
Name and T	Fitle: Dana Slater, Vice President	Name and Title	:	
Address:	1175 Lucerne Drive	Address:		
	Mt. Dora, Florida 32757		·	
Name and T	itle: Lynetta Trice Bickham, Secretar	✓ Name and Title:		
Address:	3200 Green Street		·	
	Steger, III 60475	<u></u>		
ARTICLE VI	REGISTERED AGENT			
	orida street address (P.O. Box NOT acceptable	e) of the registered ager	nt is:	_
Name:	Albert L. Jones		12	2
Address:	1423 Serissa Ct		- -	遥
	Orlando, Florida 32818		AP R	
				
ARTICLE VII	INCORPORATOR		2)
	dress of the Incorporator is:			
Name:	Albert L. Jones		့ ယ	្តិស្ន
Address:	1423 Serissa Ct Orlando, Florida 32818		N	े क्रम े इस
	Onaniuo, i iorida 32018			akti P
laving been nan ertificate, I am fa	ned as registered agent to accept service of pr millar with and accept the appointment as regi	rocess for the above s istered agent and agree	stated corporation at the place designate e to act in this capacity	d in th
<u> US</u>	Jan		12/19/2011	
	Required Signature of Registered Ager	nt	Date	
	ment and affirm that the facts stated herein ar t of State constitutes a third degree felony as pro			ocumen
^ Department				
1) L	Dan.		12/19/2011	