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SECRETARY OF STATE
ALLAHASSEF F. CALE

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## **COVER LETTER**

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

SUBJECT: New Horizion 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 C	OPY REQUIRED		
,					
FROM: Jearlene Jefferson Name (Printed or typed)					
36 Circle Ave					
melbourne 71 32935					
321-421 - 4560 Daytime Telephone number					

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

E-mail address: (to be used for future annual report notification)
New Horizion Ministries, Churchser Gmail, Com

## ARTICLES OF INCORPORATION

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

The name of the corporation shall be: New Horizion Ministries INC.

ARTICLE II PRINCIPAL OFFICE

111(1 (VDE) II	TRINCH AD OFFICE	2.4 (1) 11 (0.000)		
	Principal street address	Mailing address, if different is:		
	2008 Dineapple Ave	10 BOX 061064		
	melbourne Florida	Palm 1894 71 32906		
	<u> </u>	- 7)on da		
ARTICLE III	PURPOSE			
	which the corporation is organized is:			
Churc	en Organizations I Church	n Services		
ARTICLE IV	MANNER OF ELECTION The manner in which the Ficers & Directors Coather +	agether meeting and votering		
ARTICLE V	INITIAL OFFICERS AND/OR DIRECTORS	the same,		
	itle: Jearlene Jetterson Name	and Title: Kenneth, Johnson		
Address:	36 Circle Ave Addr			
Address.	unit 2	Palm Bay Horida 12908		
	Melboure Florida 32935	191111 1949 11919 78908		
	THE DOULE HOLING DECISO			
Name and T	itle: John H. Jefferson Name	and Title: Melissa Jefferson		
Address:	36 circle Ave Addr			
	unit#2	unit 2 melbourne		
	melhowne Florida 32935	Florida 32938		
	aliabile a ld!	011-7- 01 1-		
Name and T	Title: Nichole, Coaddy Name	and Title: Ali Sha Cooks		
Address:	480 witshire Aue Addre			
	1991m 19ay 71 32908	melbourne 7 orida		
	**************************************	32907		
4 5 5 7 5 7 5 7 5	22010002222			
ARTICLE VI	REGISTERED AGENT			
	orida street address (P.O. Box NOT acceptable) of the regi	stered agent is:		
Name:	searche Tellerson	EE 7		
Address:	melhourne Florida	Sign of the state		
	22935	L-9 PH AHASSEE.		
	<u></u>	ASSEE. F		
ARTICLE VII	INCORPORATOR	% _ M		
	dress of the Incorporator is:	T9 = 17		
Name:	Jearlene Jefferson	TS -		
Address:	36 Circle Ave Unit 2	97		
	mel Dourne A 32935	<b>温</b> る		
		he above stated corporation at the place designated in this		
cortificate, I am fa	miliar with and accept the appointment as registered agen	t and agree to act in this capacity		
( ) 0 - 0 -	\	1 2 12		
Journ	e Jeffelisan	<u> 7-3-72</u>		
	Required Signature of Registered Agent	Date		
$\checkmark$				
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.		
10.0	110///	7 17		
Dolling	Sekhlison	<u> </u>		
T	Required Signature of Incorporator	Date		
/				
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