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SECRETARY OF STATE

10/15/12

COVER LETTER

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

SUBJECT: Vision Deliverance Outreach Ministry, 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 ADDITIONAL C	\$87.50 Filing Fee, Certified Copy & Certificate OPY REQUIRED
FROM	12230 Crabapple		
	Jacksonville, Flor	tate & Zip	
	122230 கொள்ளை கூ	_	

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)

ARTICLE I The name of the co	NAME Vision Deliverance O	utreach Ministi	ry, Inc
RTICLB II	PRINCIPAL OFFICE		
RIMLBII	Principal street address		Mailing address, if different is:
	12230 Crabapple Cove Drive		same
	Jacksonville, Florida 32225		
			
RTICLE III	PURPOSE hich the corporation is organized is:		
	or religious worship, church service	which a corner	rotion Not For Profit may eversing
			es, regulations, doctrine and discipline
	nomination church of America.	jeci w me ruie	is, regulations, docume and disciplini
i die Hon-dei	nomination charcinot America.		
RTICLE IV	MANNER OF ELECTION The manner is	in which the director	rs are elected and appointed:
ne president of the board r laws of the Not Fot Prof	of directors and or the pastor of the church with advice and concent of the church with advice and concent to the corporation state that the terms of service may not exceed more than	of the directors elected by the	ne annual society meeting. May appoint the directors of the corporation. of the re-election as stated in the by laws of the corporation.
RTICLE V	INITIAL OFFICERS AND/OR DIRECT	•	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	de: Denise Johnson (President)	Name and Title	e:Ronald Merritt (Vice President)
Address:	12230 Crabapple cove Drive	Address:	12230 crabapple cove Drive
	Jacksonville, Florida32225	**F=#X	Jacksonville, Florida 32225
Name and Tit	tle:mechell Knight (secretary)	— Name and Title	e:
Address:	5959 Fortcaroline Road apt.1402		<u> </u>
	Jacksonville, Florida 32277	<u> </u>	
).7 100°			
Name and 11 Address:	tle:		e:
Addicas.		Address.	
RTICLE VI	REGISTERED AGENT		
	rida street address (P.O. Box NOT acceptable)	of the registered age	ent is:
Name:	Denise Johnson		L-0.
Address:	12230 Crabapple Cove Drive		<u> </u>
	Jacksonville, Florida 32225		
	The state of the s		2 E
RTICLE VII	INCORPORATOR		
	ress of the Incorporator is:		
Name:	Denise Johnson	_	
Address:	12230 Crabapple cove Drive Jacksonville, Florida32225	•	ੂੰ ਜ਼ਿੰਨ ਜ਼ਿੰਨ
	Jackson Ville, Florida 32223		
	ed as registered agent to accept service of pro- niliar with and accept the appointment as regist.		stated corporation at the place designated in the
7 1			ze to ues in this cupacity
Dex	Required Signature of Registered Agent	insom	October 1, 2012
7	Required Signature of Registered Agent		Date
ubmit this docun	nent and affirm that the facts stated herein are	true. I am aware th	hat any false information submitted in a docume
- / /	of State constitutes a third degree felony as provi		3, F.S.
West	ise Juhnon Denise	lohuso y	October 1, 2012
	Required Signature of Incorporato		Date