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(Requestor's Name) (Address) (Address)	600240906436
(City/State/Zip/Phone #)	10/19/1201021017 **78.75
(Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:	FILED 12 OCT 19 PM 4:05 SECRETARY OF STATE TALLAWSSEE, FLWES
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COVER LETTER

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

By Faith I'm Still Here, Inc. SUBJECT: (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

Filing Fee, Certified Copy & Certificate

\$87.50

ADDITIONAL COPY REQUIRED

CDC Consulting Firm FROM: Name (Printed or typed)

P.O. Box 9632

Address

33310 Ft. Lauderdale, FL City, State & Zip

954-309-4280

Daytime Telephone number

nelson4699@netzero.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 NAME

The name of the corporation shall be: By Faith I'm Still Here, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

3961 NW 34th Ave. Lauderdale Lakes, FL 33309

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

The Corporation is organized exclusively for Charitable and Educational purposes, as specified in Section 501(c)(3) of the Internal Revenue Code.

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

Initial directors were appointed by the President, future directors will be elected by the Board.

ARTICLE V	INITIAL OFFICERS AND/OR DIRECT	JRS			
Name and Ti	tle: Tarrica Dunlap President/Dir.	Name and Tit	le: Jacara Owens - Secretary		
Address:	3961 NW 34th Ave.	Address:	<u>3961 NW 34th Ave.</u>		
	Lauderdale Lakes, FL 33309		Lauderdale Lakes, FL 33309		
	tle: Faith Dunlap - Treasurer/ Director		d Title: Otis L. Kemp - Director		
	3961 NW 34th Ave.	Address:	115 NE 3rd ST		
	Lauderdale Lakes, FL 33309		Pompano Bch, FL 33060		
Name and Ti	tle:	— Name and Tit	:le:		
Address:		· • • • · · ·			
ARTICLE VI	REGISTERED AGENT	—	· · · ·		
The name and Flo	rida street address (P.O. Box NOT acceptable)	of the registered ag	gent is:		
Name:	Tarrica Dunlap		ALL SEE		
Address:	3961 NW 34th Ave.		-		
	Lauderdale Lakes, FL 33309				
	······································				
ARTICLE VII	INCORPORATOR				
The name and add	ress of the Incorporator is:				
Name:	Tarrica Dunlap		- * / 		
Address:	3961 NW 34th Ave.				
	Lauderdale Lakes. FL 33309		in the second		

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

<u>10-15.12</u> 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

10-15-12 Date

ARTICLE VIII DISSOLUTION OF ASSETS

Upon the dissolution of this organization, assets shall be distributed for one or more exempt purposes within the meaning of Section 501©3 of the Internal Revenue Code, or corresponding section of any future federal tax code, or Shall be distributed to the federal government or to a state or local government for a public purpose.

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