

N1200001276

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



600242272376

12/03/12--01038--007 \*\*78.75

FILED

12 DEC -3 AM 9:57

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

J. STEWART DEC 04 2012

**COVER LETTER**

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

**SUBJECT:** New Vision Community Church, Incorporated  
(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:** Devin D. Brown  
Name (Printed or typed)

421 NE 210 Circle Terrace #102  
Address

Miami, FL 33179  
City, State & Zip

786-999-4321  
Daytime Telephone number

revddbrown@yahoo.com

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

FILED  
12 DEC -3 AM 9:57  
SECRETARY OF STATE  
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: New Vision Community Church, Incorporated

**ARTICLE II PRINCIPAL OFFICE**

Principal street address  
421 NE 210 Circle Terrace #102  
Miami, FL 33179

Mailing address, if different is:

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

New Vision Community Church, Incorporated exists to provide quality spiritual and social services to people living primarily in urban communities.

**ARTICLE IV MANNER OF ELECTION** The manner in which the directors are elected and appointed: The Board of Directors shall be appointed by the President (Lead Pastor).

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Devin D. Brown, President

Address: 421 NE 210 Circle Terrace #102  
Miami, FL 33179

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: Felicia E. Brown, Secretary & Treasurer

Address: 421 NE 210 Circle Terrace #102  
Miami, FL 33179

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

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: Devin D. Brown  
Address: 421 NE 210 Circle Terrace #102  
Miami, FL 33179

DDB 

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

12 DEC -3 AM 9:57

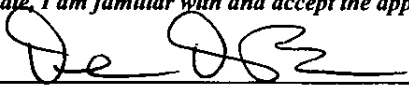
FILED

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Devin D. Brown  
Address: 421 NE 210 Circle Terrace #102  
Miami, FL 33179

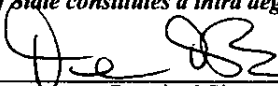
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Required Signature of Registered Agent

11/30/12  
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

11/30/12  
Date