

N12000011409

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

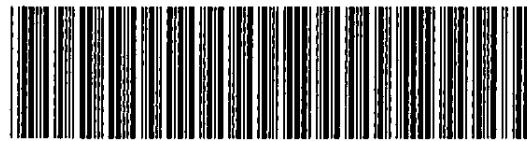
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900242297199

12/06/12--01004--010 **/8.75

FILED
12 DEC -6 AM 7:24
SECRETARY OF STATE
TALLAHASSEE FLORIDA

12/7
8

COVER LETTER

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

SUBJECT: Gate To Heaven Apostolic Faith 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

\$87.50
Filing Fee,
Certified Copy
& Certificate

ADDITIONAL COPY REQUIRED

FROM: Michael L. Coleman
Name (Printed or typed)

2027 Limkin LN
Address

TALLAHASSEE, FLORIDA 32305
City, State & Zip

850-727-2010
Daytime Telephone number

gate2heaven@ymail.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:

Gate to Heaven Apostolic Faith Ministry
INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address

2503 Saxon St.
Tallahassee, Fla

32310

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

This Corporation is For all Religious
Purposes

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected and appointed:

As provided in the ByLaws

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Michael L. Coleman/Pastor (Director) Name and Title: Fred Robinson/Treasurer

Address: 2027 Limpkin Lane
Tallahassee, FL 32305

Address: 3111 Pasco Street
Tallahassee, FL 32310

Name and Title: Alfreda L. Coleman/Co-Director Name and Title:

Address: 2027 Limpkin Lane
Tallahassee, FL 32305

Name and Title: Ruthie M. Coleman/Secretary Name and Title:

Address: 3111 Pasco Street
Tallahassee, FL 32310

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Michael L. Coleman
Address: 2027 Limpkin Lane
Tallahassee, FL
32305

12 DEC -6 AM 7:24
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

ARTICLE VII INCORPORATOR

The name and address of the incorporator is:

Name: Michael L. Coleman
Address: 2027 Limpkin Lane
Tallahassee, FL
32305

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

Michael L. Coleman

Required Signature of Registered Agent

11-19-12

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.

Michael L. Coleman

Required Signature of Incorporator

11-19-12

Date