

N130 00002447

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

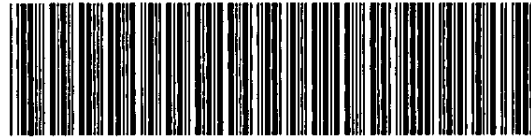
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

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729
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FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 27, 2013

STANLEY PAULAS
5401 22ND CT
LAUDERHILL, FL 33313

SUBJECT: SOAR ON EAGLE WINGS MINISTRIES INC
Ref. Number: W13000008985

We have received your document for SOAR ON EAGLE WINGS MINISTRIES INC and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

Section 617.0202(d), Florida Statutes, requires the manner in which directors are elected or appointed be contained in the articles of incorporation or a statement that the method of election of directors is as stated in the bylaws.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Justin M Shivers
Regulatory Specialist II
New Filing Section

Letter Number: 413A00003572

COVER LETTER

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

SUBJECT: Soar On Eagle Wings 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 COPY REQUIRED

FROM: Stanley Paulas

Name (Printed or typed)

5401 22nd Court

Address

Lauderhill, FL, 33313

City, State & Zip

954-682-7641

Daytime Telephone number

paulasstanley@yahoo.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: Soar On Eagle Wings Ministries Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address:

5401 NW 22nd Court
Lauderhill, FL 33313

Mailing address, if different is:

P.O. Box 101872
Fort-Lauderdale FL
33310

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To impact the community
in a positive way. We are a Church Ministry
Reaching the world with the good news of the
Gospel.

ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected and appointed: The directors
will be appointed by the founder (Stanley Paulas).

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

<u>Founder</u>	
Name and Title: <u>Stanley Paulas (Pastor)</u>	Name and Title: <u>Tristen A. Paulas (cofounder)</u>
Address: <u>5401 NW 22nd Court</u>	Address: <u>5401 NW 22nd Court</u>
<u>Lauderhill, FL 33313</u>	<u>Lauderhill, FL 33313</u>

Name and Title: <u>Rochevia Eugene (Secretary)</u>	Name and Title: _____
Address: <u>1280 NE 117 St,</u>	Address: _____
<u>Miami, FL 33161</u>	_____

Name and Title: _____	Name and Title: _____
Address: _____	Address: _____
_____	_____
_____	_____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: Stanley Paulas

Address: 5401 NW 22nd Court
Lauderhill, FL

ARTICLE VII INCORPORATOR


The name and address of the Incorporator is:

Name: Stanley Paulas

Address: 5401 NW 22nd
Lauderhill, FL 33313

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TALLAHASSEE FLORIDA

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

2/9/13
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

2/9/13
Date