

N13000003229

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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MAIL

(Business Entity Name)

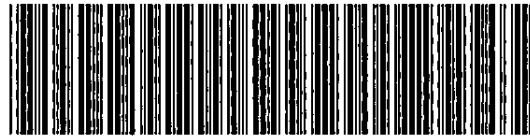
(Document Number)

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Special Instructions to Filing Officer:

~~W13-16258~~

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

1/4

COVER LETTER

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

SUBJECT: Undersanding Gods 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: Pastor Melvin Russell, Sr.

Name (Printed or typed)

1711 North West 1st Avenue

Address

Pompano Beach, Fl 33060

City, State & Zip

954-783-1898

Daytime Telephone number

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

NOTE: Please provide the original and one copy of the articles.



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 19, 2013

PASTOR MELVIN RUSSELL, SR.
1711 NORTH WEST 1ST AVENUE
POMPANO BEACH, FL 33060

SUBJECT: UNDERSANDING GOD'S MINISTRIES, INC.
Ref. Number: W13000016258

We have received your document for UNDERSANDING GOD'S MINISTRIES, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

It appears the filing submitted has a typographical error in the entity name. Please verify this name and all other information contained in the filing and resubmit it for processing.

The document must contain a registered agent with a Florida street address and a signed statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

The registered agent must sign accepting the designation.

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.

Valerie Herring
Regulatory Specialist II
New Filing Section

Letter Number: 713A00006500

ARTICLES OF INCORPORATION
In compliance with Chapter 617, F.S., (Not for Profit)

ARTICLE I NAME

The name of the corporation shall be: Understanding God's Ministries, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address:
159 South West Terrace
Deerfield Beach, Fl

Mailing address, if different is:
1711 North West 1st Avenue
Pompano Beach, Fl 33060

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To establish and oversee places of worship under to guidance of the Holy Spirit
(Titus 1:15; Ps. 107:3; Acts 2:42,46,47 Heb.10:25). To conduct the work of evangelizing both home and foriegn missions in obedience
of the command of our Lord Jesus Christ (Matt. 28:19,20; Mark 16:15,16; Luke 24:46,47; John 20:21). To create departments as
maybe necessary in order to establish places ofs worship to spread the Gospel (including but not limited to educational, recreational,
community and social service) and to support missionary activity (Act 6:1-7). To have the right to own, hold, trust, use, possess, sell,
convey, mortgage, lease, or dispose of such property, real, or chattel, as maybe needfor the prosecution of it's work. To license
miniters of the Gospel and their covering (1Thess. 5:12; 2Thess 2:15;3:4; Heb. 13:17).

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected and appointed: They shall be elected
at the annual meeting of the members in the mannerset forth in the bylaws.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Melvin D.Russell Sr. PD
Address: 1711 NW 1st Ave
Pompano Beach, Fl.
33060

Name and Title: Valerie James Sec.
Address: 761 SW 2nd Terr.
Deerfield Beach, Fl.
33441

Name and Title: Charlotte Russell VP
Address: 1711 NW 1st Ave
Pompano Beach, Fl.
33060

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

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:

Charlotte Russell

Address:

1711 NW 1st Ave

Pompano Beach, Fl. 33060

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name:

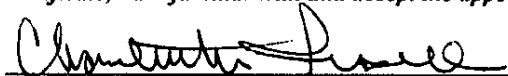
Melvin Russell Sr.

Address:

1711 NW 1st Ave

Pompano Beach, Fl. 33060

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

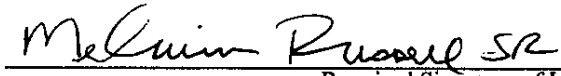


Required Signature of Registered Agent

3/28/13

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

3/28/13

Date