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COVER LETTER

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

SUBJECT: George Mathew 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: George Mathew

Name (Printed or typed)

10932 Black Swan Ct

Address

Seffner, Florida 33584

City, State & Zip

7193571419

Daytime Telephone number

manifestjesusgal522@gmail.com

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

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

ARTICLE I NAME

The name of the corporation shall be: George Mathew Ministries Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address:
10932 Black Swan Ct
Seffner, Fl 33584

Mailing address, if different is:

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ARTICLE III PURPOSE

The purpose for which the corporation is organized is: The purpose of this corporation shall to be propagate the
gospel of the Lord Jesus Christ, and it is organized exclusivly for charitable, religious, missionary and
educational purposes, including for such purposes, the making of distributions to churches and to
organizations that qualify as exempt organizations under section 501(c)(3) of the U.S. Internal
Revenue Code.

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

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: George Mathew (President) Name and Title: Shirley George (Director)

Address 10932 Black Swan Ct Address: 908 S Valrico Rd
Seffner, Fl 33584 Valrico, Fl 33594

Name and Title: Koshy George (Director) Name and Title: _____

Address 10725 Boyette Creek Blvd Address: _____
Riverview, Fl 33569

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

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: George Mathew

Address: 10932 Black Swan Ct

Seffner, FL 33584

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: George Mathew

Address: 10932 Black Swan Ct

Seffner, FL 33584

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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

07/13/2013

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

07-13-2013

Date