N13000007327

(Requ	uestor's Name)	
(Addı	ess)	
·	ress)	
(City/	State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL
(D.033	in and Turking Name (
(busi	ness Entity Name)	
(Doct	ument Number)	
Certified Copies	Certificates of	Status
Special Instructions to Fi	iling Officer:	·
	Office Use Only	٦٤



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MJ, MAN, J

13 AUG -2 AMIII: III

COVER LETTER

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

SUBJECT: I'M Fully Committed Deliverance 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

3 AUG -2 AH II:

FROM

Pastor - Karen Jennings

Name (Printed or typed)

6511 San Juan Avenue #15

Address

Jacksonville, FL 32210

City, State & Zip

(904) 520-1325

Daytime Telephone number

kjennings630@yahoo.com

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

July 18, 2013

KAREN JENNINGS 6511 SAN JUAN AVE #15 JACKSONVILLE, FL 32210

SUBJECT: I'M FULLY COMMITTED DELIVERABCE MINISTRY INC.

Ref. Number: W13000040473

We have received your document for I'M FULLY COMMITTED DELIVERABCE MINISTRY 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):

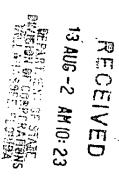
Section 617.0202(d), Florida Statutes, requires the manner in which directors are elected or appointed be contained in the articles of incorporation or a statement that the method of election of directors is as stated in the bylaws.

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.

Tim Burch Regulatory Specialist II New Filing Section

Letter Number: 313A00017480



ARTICLES OF INCORPORATION

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

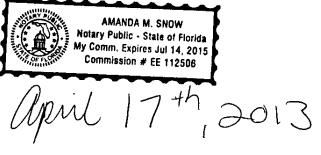
NAME

I'M Fully Committed Deliverance Ministry Inc.

The name of a	the corporation shall be: TWI UITY COI		- Chiverantes in the cary in	
	Principal <u>street</u> address: 6511 San Juan Avenue #15		Mailing address, if different is:	13 7
	Jacksonville, Florida		:	100 - N
-	32210			题是
	for which the corporation is organized is: pirtual guidance and the understanding of the b		a church and outreach ministry and	in accordance
	ws of The Florida Statues to Corporations a no			
as well as all	needs to run and operate a ministry service.To	feed the hungry	and cloth the less fortuante in and ar	ound our
community of	outreach mission, To teach in conference and re	adio and media o	communications as well as written pu	olications,To baptiz
with water, 7	To perform weddings, and to christening bi	rth and all form	n ceremonies and church events.	
ARTICLE		RECTORS		
Name and Ti	President/Karen Jennings	Name and Title		
Address	6511 San Juan Avenue. #15	Address:	6511 San Juan Avenue. #	<u>15</u>
	Jacksonville, Florida		Jacksonville, Florida	
	32210		32210	
Name and Ti	Vice President/ Shauavea Jennings	Name and Title		<u> </u>
Address	6511 San Juan Avenue. #15	Address:	6511 San Juan Avenue #	<u>15</u>
	Jacksonville, Florida		Jacksonville, Florida	
	32210		32210	
Name and Ti	secretary/A'Alashia Sims	Name and Title	×	
Address	1807 East 27th Street	Address:		
	Jacksonville, Florida			

32206

Name and Title:_	Name and Title:
Address	Address:
_	
	Name and Title: Address:
Name and Title:_	Name and Title:
Address	Address:
ARTICLE VI	REGISTERED AGENT prida street address (P.O. Box NOT acceptable) of the registered agent is:
Name:	Karen Jennings
Address:	6511 San Juan Avenue #15
	Jacksonville, Florida 32210
The name and ad	INCORPORATOR dress of the Incorporator is:
Name:	Karen Jennings
Address:	6511 San Juan Avenue #15
	Jacksonville, Florida 32210
Having been nan cert.ficate, I am f	ned as registered agent to accept service of process for the above stated corporation at the place designated in this amiliar with and accept the appointment as registered agent and agree to act in this capacity
Marin	We 4/17/13
- (W 00 /	Required Signature of Registered Agent Date
	ment and offirm that the facts stated herein are true. I am aware that any fulse information submitted in a document to State conspitutes a third degree felony as provided for in s.817.155, F.S.
Mar	Ml 4/17/13
	Required Signature of Inforporator Date
	Marine.



IN WITNESS WHEREOF, the undersigned have made and subscribed to these Articles of Incorporation at 6511 San Juan Avenue on March 6, 2013.

Authorized Signature

Authorized Signature

Print Name and Title

THIRD INCORPORATOR

Authorized Signature

Authorized Signature

FOURTH INCORPORATOR

FOURTH INCORPORATOR

Authorized Signature

Auth