

N13000011243

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

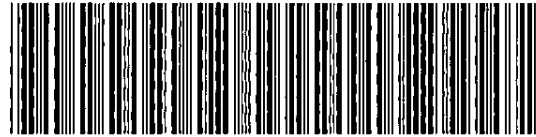
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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12/19/13--01008--009 \*\*78.75

RECEIVED  
13 DEC 19 AM 10:43  
DIVISION OF CORPORATIONS

13 DEC 19 AM 10:50  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

APPROVED  
AND  
FILED

*[Handwritten signature]*

12 AD

## COVER LETTER

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

SUBJECT: HIGHER DIMENSION CHURCH, TALLAHASSEE  
(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:

CARLOS L. COLLINS  
Name (Printed or typed)

2910 KERRY FOREST PARKWAY D-4 # 116  
Address

TALLAHASSEE FL 32309  
City, State & Zip

850-320-2042  
Daytime Telephone number

KMC.CORPORATION@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)

EFFECTIVE 1/1/14

**ARTICLE I NAME**

The name of the corporation shall be: HIGHER DIMENSION CHURCH, TALLAHASSEE, INC.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address:

Mailing address, if different is:

SAME  
9398 WINDAM WAY TALL FL  
32312

SAME

13 DEC 19 AM 10:50  
FILED  
TALLAHASSEE, FLORIDA

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: CHURCH, MINISTRY, OUTREACH

**ARTICLE IV MANNER OF ELECTION** The manner in which the directors are elected and appointed: APPOINTED

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: CARLOS L. COLLINS, CEO Name and Title: \_\_\_\_\_

Address: 9398 WINDAM WAY Address: \_\_\_\_\_

TALLAHASSEE, FL 32312

Name and Title: NICKY E. COLLINS Name and Title: \_\_\_\_\_

Address: 9398 WINDAM WAY Address: \_\_\_\_\_

TALL. FL 32312

Name and Title: LAKESHIA HAYES Name and Title: \_\_\_\_\_

Address: SAME 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: CARLOS L. COLLINS

Address: 9398 WINDAM WAY

TALL FL. 32312

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: CARLOS L. COLLINS

Address: 9398 WINDAM WAY

TALL FL. 32312

*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*

Carlos L. Collins

Required Signature of Registered Agent

Dec. 19, 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.*

Carlos L. Collins

Required Signature of Incorporator

Dec 19, 2013  
Date