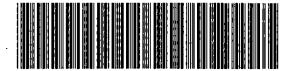
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(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				





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01/17/14--01011--001 **78.75



N 01/27/14

COVER LETTER

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

SUBJECT: BOUJEE' BOUTIK

(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 □ \$87.50

Filing Fee Filing Fee,
& Certified Copy
& Certificate

ADDITIONAL COPY REQUIRED

FROM: Kimberly Daniels

Name (Printed or typed)

121 Schooner Key Place

Address

Jacksonville, FL 32218

City, State & Zip

904-237-9363

Daytime Telephone number

Twinfaith10@aol.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)

	II PRINCIPAL OFFICE	
12	Principal street address: 21 SCHOONER KEY PLACE	Mailing address, if different is:
J	ACKSONVILLE, FL 32218	
ARTICLE The purpose	## PURPOSE for which the corporation is organized is:	PROVIDE AN OUTREACH MINISTRY AND SERVICE
TO TH	E COMMUNITY THROUGH	CONSIGNMENT ARTICLES WITH THE
ULTIM	ATE GOAL BEING A FUND	RAISING PROJECT FOR THE MINISTRIES
UNDE	R AND CONNECTED TO S	POKEN WORD MINISTRIES, INC.
	· · · · · · · · · · · · · · · · · · ·	
	<u> </u>	
ARTICLE		nanner in which the directors are elected and appointed:
	IV MANNER OF ELECTION The m RECTORS WILL BE APPOINTED	nanner in which the directors are elected and appointed:
	RECTORS WILL BE APPOINTED	RECTORS
THE DIF	RECTORS WILL BE APPOINTED	RECTORS
THE DIF	RECTORS WILL BE APPOINTED INITIAL OFFICERS AND/OR DI Fitle: Kimberly Daniels, President	RECTORS
THE DIF	RECTORS WILL BE APPOINTED INITIAL OFFICERS AND/OR DI Title: Kimberly Daniels, President 121 Schooner Key Place	Name and Title:
THE DIF	RECTORS WILL BE APPOINTED INITIAL OFFICERS AND/OR DI Fitle: Kimberly Daniels, President	Name and Title:
ARTICLE Name and 1 Address	RECTORS WILL BE APPOINTED INITIAL OFFICERS AND/OR DI Title: Kimberly Daniels, President 121 Schooner Key Place Jacksonville, FL 32218	Name and Title: Address:
ARTICLE Name and 1 Address	RECTORS WILL BE APPOINTED Fixe: Kimberly Daniels, President 121 Schooner Key Place Jacksonville, FL 32218 Fixe: Kim Flowers, Director	Name and Title:
ARTICLE Name and 1 Address	RECTORS WILL BE APPOINTED Title: Kimberly Daniels, President 121 Schooner Key Place Jacksonville, FL 32218 Title: Kim Flowers, Director 9197 Camshire Drive	Name and Title: Address:
Name and Taddress	RECTORS WILL BE APPOINTED Fixe: Kimberly Daniels, President 121 Schooner Key Place Jacksonville, FL 32218 Fixe: Kim Flowers, Director	Name and Title:
Name and Taddress Name and Taddress	RECTORS WILL BE APPOINTED Title: Kimberly Daniels, President 121 Schooner Key Place Jacksonville, FL 32218 Title: Kim Flowers, Director 9197 Camshire Drive Jacksonville, FL 32244	Name and Title: Address: Name and Title: Name and Title: Address:
Name and Taddress Name and Taddress Name and Taddress	RECTORS WILL BE APPOINTED Title: Kimberly Daniels, President 121 Schooner Key Place Jacksonville, FL 32218 Title: Kim Flowers, Director 9197 Camshire Drive Jacksonville, FL 32244	Name and Title: Name and Title: Name and Title: Name and Title:
Name and Taddress Name and Taddress	RECTORS WILL BE APPOINTED Title: Kimberly Daniels, President 121 Schooner Key Place Jacksonville, FL 32218 Title: Kim Flowers, Director 9197 Camshire Drive Jacksonville, FL 32244	Name and Title: Address: Name and Title: Name and Title: Address:

Name and Title:		Name and Title:	_
Address		Address:	
			-
Name and Title:		Name and Title:	
Address		Address:	
			-
ARTICLE VI The name and Flo	REGISTERED AGENT India street address (P.O. Box NOT acce	eptable) of the registered agent is:	
Name:	KIMBERLY DANIELS		14 14 14 14 14 14 14 14 14 14 14 14 14 1
Address:	121 SCHOONER KEY PLACE		
	JACKSONVILLE, FL 3	32218	
ARTICLE VII The name and ad-	INCORPORATOR dress of the Incorporator is:		TA JAN 17 PH 4:43 TALLAHASSEEL FI GRID
Name:	KIMBERLY DANIELS		
Address:	121 SCHOONER KEY P	PLACE	
	JACKSONVILLE, FL 3	32218	
Having been nam certificate, I pm fa	ned as registered agent to accept xervice miliar with and accept the appointment	of process for the above stated corporation at the place as registered agent and agree to act in this capacity	ce designated in this
Kumberly Deniels I/9			9/14
	Required Signature of Registered	d Agent Date	; /
I submit this docu to the Department	ment and affirm that the facts stated her of State constitutes a third degree felony	cin are true. I um aware that any false information subsets as provided for in s.817.155, F.S.	nitted in a document
170	MUPULY LAW Regulired Signature of Inco	irporator Dat	1/14
	/	•	1

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