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## **COVER LETTER**

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

SUBJECT: Women of God Walking in Faith 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: Susie Moore

Name (Printed or typed)

2851 Kiowa

Address

Orange Park, FL 32065

City, State & Zip

904-625-6259

Daytime Telephone number

agapeshalom5@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)

ARTICLE I The name of th	e corporation shall be: Women of Goo	d walking in Faith Ministries,Inc.	<u> </u>				
ARTICLE II	PRINCIPAL OFFICE						
285	Principal <u>street</u> address:	Mailing address, if different is:					
Or	ange Park, FI 32065						
-							
	or which the corporation is organized is:	e organization purpose to provide spiritual er or denomination using biblical based teaching and	ırichme	:nt			
principles. We believe that the bible is the inspired word of Ged.							
			MAR	SECR ISION			
			င်း				
			A H				
<del> </del>			2 :6	SIAI			
ARTICLE IV	MANNER OF ELECTION The nu	anner in which the directors are elected and appointed:	recte	rs			
are appointed to the Board.							
ADMICE D	Z ZETALA OPRIGRAS AND OR DE	PROTORG	_				
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS							
Name and Titl	Susie Moore-Director	Name and Title:					
Address	2851 Kiowa	Address:					
	Orange Park, FL 32065						
Name and Titl	Gloria Miranda	Name and Title:					
Address	700 Camp Francis Johnson	Address:					
	Orange Park, FL 32065						
Name and Titl		Name and Title:					
Address		Address:					
	Orange Park, FL 32065						

Name and Title:_	.,,	Name and Title:	<u> </u>
Address		Address:	<del></del>
<del></del>			
Name and Title:		Name and Title:	<del></del>
Address		Address:	<del></del>
-		<del></del>	
		<del></del>	<del></del>
ARTICLE VI The name and Flo	REGISTERED AGENT  orida street address (P.O. Box NOT accep	table) of the registered agent is:	
Name:	Susie Moore		
Address:	2851 Kiowa		
	Orange Park, FL 32	065	
ARTICLE VII	INCORPORATOR		
The name and ad	dress of the Incorporator is: Susie Moore		
Name:		<del> </del>	
Address:	2851 Kiowa		
	Orange Park, Fl 320	065	
		of process for the above stated corporation registered agent and agree to act in this ca	
Sus	is Morre	2-	-26-14
	Required Signature of Registered	Agent	Date
	ment and affirm that the facts stated herei t of State constitutes a third degree felony of	in are true. I am aware that any false infort is provided for in s.817.155, F.S.	nation submitted in a document
Sus	y Mor.	2.	-26-14
	Required Signature of Incorp	oorator	Date

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