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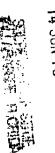
(Re	equestor's Name)	
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COVER LETTER

JESUS THE UNFOLD MYSTERIES HIDDEN TRUTH MINISTRIES, INC.

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

SOBIECT:				
	(PROPOSED CORPORA	TE NAME – <u>MUST INC</u>	LUDE SUFFIX)	
Enclosed is an original a	and one (1) copy of the Ar	ticles of Incorporation	and a check for:	
				7
\$70.00	\$78.75	□\$78.75	\$87.50	ı
· ·	· ·			ı
Filing Fee	Filing Fee &	Filing Fee	Filing Fee,	ı

. Certificate of

Status

ADDITIONAL COPY REQUIRED

Certified Copy

& Certificate

& Certified Copy

FROM: ELDER ELOUISE H. ODOM
Name (Printed or typed)

7949 MCKEOWN RD.
Address

SNEADS, FLORIDA 32460
City, State & Zip

850-566-0555
Daytime Telephone number

•

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

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

ARTICLES OF INCORPORATIONIn compliance with Chapter 617, F.S., (Not for Profit)

ARTICLE .	II PRINCIPAL OFFICE						
<u>79</u>	Principal street address: 7949 MCKEOWN ROAD SNEADS, FLORIDA 32460		Mailing address, if different is: 3241 BIG OAK STREET TALLAHASSEE, FLORIDA 32311				
S							
	III PURPOSE for which the corporation is organized is: NAL HEALING OF GOD SAINTS,. "TH						
	NS, DISCIPLES AND A STRONG DE						
			, , , , , , , , , , , , , , , , , , ,				
							
				IRECTOR	 S		
_	IV MANNER OF ELECTION The ma	anner in which the	e directors are elected and appointed: THE C	DIRECTOR	<u>s</u>		
_	IV MANNER OF ELECTION The ma	anner in which the	e directors are elected and appointed:	DIRECTOR	 S		
_	ECTED BY THE ELDER'S OF THE	CHURCH A	e directors are elected and appointed:	DIRECTOR	<u>s</u>		
ARE ELE	V INITIAL OFFICERS AND/OR DID	CHURCH A	AS NEEDED.	DIRECTOR	S 		
ARE ELE ARTICLE Name and T	V INITIAL OFFICERS AND/OR DID	CHURCH A	AS NEEDED.	DIRECTOR	<u>s</u>		
ARTICLE Name and T	V INITIAL OFFICERS AND/OR DII itle: DIR.BISHOP STEVEN ODOM	RECTORS Name and Title	PRES.ELDER ELOUISE H. ODOM	DIRECTOR	s S		
ARE ELE ARTICLE Name and T	V INITIAL OFFICERS AND/OR DID INITIAL OFFICERS AND/OR DID INITIAL OFFICERS AND/OR DID 3241 BIG OAK STREET	RECTORS Name and Title	PRES.ELDER ELOUISE H. ODOM 3241 BIG OAK STREET	DIRECTOR	<u>s</u>		
ARE ELE ARTICLE Name and T Address	V INITIAL OFFICERS AND/OR DID INITIAL OFFICERS AND/OR DID STEVEN ODOM 3241 BIG OAK STREET TALLAHASSEE, FLORIDA 32311	RECTORS Name and Title Address:	PRES.ELDER ELOUISE H. ODOM 3241 BIG OAK STREET TALLAHASSEE, FLORIDA 32311	DIRECTOR	<u>s</u>		
ARE ELE ARTICLE Name and T Address	V INITIAL OFFICERS AND/OR DID INITIAL OFFICE	RECTORS Name and Title Address:	PRES.ELDER ELOUISE H. ODOM 3241 BIG OAK STREET TALLAHASSEE, FLORIDA 32311	DIRECTOR	<u>s</u>		
ARE ELE ARTICLE Name and T Address	V INITIAL OFFICERS AND/OR DID SILIE: DIR.BISHOP STEVEN ODOM 3241 BIG OAK STREET TALLAHASSEE, FLORIDA 32311 SEC. BENISHA HALL	RECTORS Name and Title Address:	PRES.ELDER ELOUISE H. ODOM 3241 BIG OAK STREET TALLAHASSEE, FLORIDA 32311		<u>s</u>		
ARE ELE ARTICLE Name and T Address	V INITIAL OFFICERS AND/OR DID 3241 BIG OAK STREET TALLAHASSEE, FLORIDA 32311 SEC. BENISHA HALL 3241 BIG OAK STREET	RECTORS Name and Title Address:	PRES.ELDER ELOUISE H. ODOM 3241 BIG OAK STREET TALLAHASSEE, FLORIDA 32311		<u>S</u>		
ARE ELE ARTICLE Name and T Address Name and T Address	V INITIAL OFFICERS AND/OR DID SILIE: DIR.BISHOP STEVEN ODOM 3241 BIG OAK STREET TALLAHASSEE, FLORIDA 32311 SEC. BENISHA HALL 3241 BIG OAK STREET TALLAHASSEE, FL 32311	RECTORS Name and Title Address: Name and Title	PRES.ELDER ELOUISE H. ODOM 3241 BIG OAK STREET TALLAHASSEE, FLORIDA 32311	14 JUN 10	S		
ARE ELE ARTICLE Name and T Address Name and T Address	V INITIAL OFFICERS AND/OR DID 3241 BIG OAK STREET TALLAHASSEE, FLORIDA 32311 SEC. BENISHA HALL 3241 BIG OAK STREET	RECTORS Name and Title Address: Name and Title	PRES.ELDER ELOUISE H. ODOM 3241 BIG OAK STREET TALLAHASSEE, FLORIDA 32311		S		

Name and Title:		Name and Title:	.		
Address		Address:			
					
					
Name and Title:		Name and Title:	· · · · · · · · · · · · · · · · · · ·		
Address		Address:		<u>.</u>	
_					
	REGISTERED AGENT ida street address (P.O. Box NOT accept	table) of the registered agent is:			
Name:	ELDER ELOUISE H. O				
Address:	3241 BIG OAK STREE	 T		題が	
	TALLAHASSEE, FLORIDA 3	32311	17 A		<u> </u>
,			H.	() ()	
	INCORPORATOR ress of the Incorporator is:			PH 12:	
Name:	ELDER ELOUISE H. O	OOM		i —	•
Address:	3241 BIG OAK STREE	T			
	TALLAHASSEE 32311				
	d as registered agent to accept service of miliar with and accept the appointment as			ace designa	ted in this
Elphon	Elmine Ste Old	M	06/10/2	014	
0000	Required Signature of Registered A	Agent	Da	ate	_
I submit this docum to the Department of	ent and affirm that the facts stated herei f State constitutes a third degree felony a	n are true. I am aware that any false s provided for in s.817.155, F.S.	information su	bmitted in a	document
6/d02	Chung (MI) () d	M	06/10/2	2014	
to your	Required Signature of Incorp	orator	D	ate	-

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