

N14000009274

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

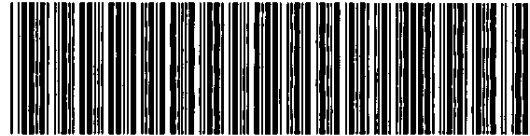
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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08/07/14--01010--008 **78.75

FILED
14 OCT -6 PM 4:19
TALLAHASSEE, FLORIDA

11/14-49229 UNID 10/7

COVER LETTER

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

SUBJECT: City Lights 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: Monique Marisa Norris

Name (Printed or typed)

2908 Dunblane Court

Address

Kissimmee, Fl. 34743

City, State & Zip

407-738-8907

Daytime Telephone number

mnorris18@gmail.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

August 12, 2014

MONIQUE MARISA NORRIS
2908 DUNBLANE COURT
KISSIMMEE, FL 34743

SUBJECT: CITY LIGHTS MINISTRIES, INC.
Ref. Number: W14000049229

We have received your document for CITY LIGHTS MINISTRIES, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The Florida Statutes require an entity to designate a street address for its principal office address. A post office box is not acceptable for the principal office address. The entity may, however, designate a separate mailing address. The mailing address may be a post office box.

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.

The title(s) in the officer/director field(s) is/are not acceptable. Please refer to the following link for acceptable officer/director title information.
<http://www.sunbiz.org/titledef.html>.

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.

Maryanne Dickey
Regulatory Specialist II
New Filing Section

Letter Number: 514A00017285

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

ARTICLE I NAME

City Lights Ministries, Inc.

The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE

Principal street address:
2908 Dunblane Court

Kissimmee, Fl 34743

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: to help develop the world's future leaders through the outlet of various art forms; to reach the community locally and at large by emphasizing the importance of helping and inspiring others through the participants' art forms, mentorship, and team, leadership, and character building. This organization believes that every individual has something worth shining for and can inspire others to glow towards optimism for a better present and a brighter future. The organization aims to teach that passions and art forms can become the stepping stones towards meaningful, personal, and humanitarian connections to others.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected and appointed: As stated by bylaws.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Monique Norris, CEO/President

Address: 2908 Dunblane Court

Kissimmee, Fl 34743

Name and Title: Chelsea Browne, Officer

Address: 123 Aurora Lane

Kissimmee, Fl 34758

Name and Title: Briana Derry, Officer

Address: 840 NW 155 Lane

Apt. 201

Miami, Fl 33169

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

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: Monique Norris
Address: 2908 Dunblane Court
Kissimmee, Fl


14 OCT -6 PM 4:19
RECEIVED
FLORIDA DEPARTMENT OF
STATE

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Monique Norris
Address: 2908 Dunblane Court
Kissimmee, Fl

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

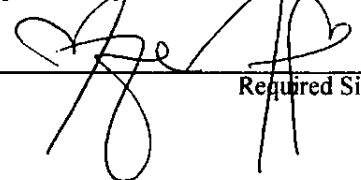


Required Signature of Registered Agent

9/17/2014

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.



Required Signature of Incorporator

9/17/2014

Date