

N14000011737

(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:

Office Use Only



200267725152

12/29/14--01008--005 \*\*78.85

FILE  
14 DEC 29 AM 11:27  
TALLAHASSEE, FLORIDA

12/31/14 ch

## COVER LETTER

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

**SUBJECT: The Living Bread of Life 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: Alphonzo Austin Jr.  
Name (Printed or typed)

420 E. University Ave.  
Address

Deland, FL 32724  
City, State & Zip

(407) 486-2136  
Daytime Telephone number

alphonzoaustin@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    NAME**

The name of the corporation shall be: The Living Bread of Life Ministries, Inc.

**ARTICLE II    PRINCIPAL OFFICE**

Principal street address:

205 W. 19<sup>th</sup> Street

Apopka, FL 32703

Mailing address, if different is:

P.O. Box 963

Deland, FL 32721

**ARTICLE III    PURPOSE**

The purpose for which the corporation is organized is: To be a faith based ministry that believes in Jesus Christ, as our Lord and Savior. We intend to reach out to individuals and encourage them, through Strategic Bible classes, Effective Interactive Worship Services and Enhanced Bible messages. We intend to reach out to local communities through humanitarian services, With the purpose of proclaiming the Love that our Lord and Savior Jesus Christ have for all mankind.

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

Appointed by President

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

Name and Title: Alphonzo Austin Jr. (President)

Address: 420 E. University Ave.  
Deland, FL 32724

Name and Title: Lashawnda Austin (Secretary)

Address: 420 E. University Ave.  
Deland, FL 32724

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: Jackie Denard (Treasure)

Address: 5514 Cinderland Parkway  
Apt. D Orlando, FL 32808

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

FILED  
11 DEC 29 AM 11:27  
TALLAHASSEE, FLORIDA  
STATE

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: Alphonzo Austin Jr.

Address: 420 E. University Ave.

Deland, FL 32724

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Alphonzo Austin Jr.

Address: 420 E. University Ave.

Deland, FL 32724

RECEIVED  
14 DEC 29 AM 11:27  
TALLAHASSEE, FLORIDA

*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

Alphonzo Austin Jr. 12/19/14  
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

Alphonzo Austin Jr. 12/19/14  
Date