

N 15000002646

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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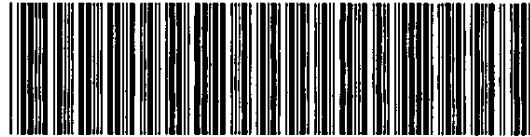
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
ATLANTA, GEORGIA

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3/13 cm

COVER LETTER

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

SUBJECT: **GOLDEN ORACLE 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: **REBECCA A. IRWIN**
Name (Printed or typed)
400 CHANEY RD., #1016
Address
SMYRNA, TN 37167
City, State & Zip
615-417-7276
Daytime Telephone number
rebeccaanne41@comcast.l
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: GOLDEN ORACLE MINISTRIES INC

ARTICLE II PRINCIPAL OFFICE

Principal street address:
21215 Tyrell Way
Land O Lakes, FL 34638

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To teach Christians practical
application of Biblical principles for the purpose of demonstrating
the power of God and His principles for evangelizing the lost.

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SECRETARY OF STATE
TALLAHASSEE, FL 32399

ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected and appointed: by the
forming board.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: <u>Myron Golden, Pres.</u>	Name and Title: _____
Address: <u>21215 Tyrell Way</u>	Address: _____
<u>Land O Lakes, FL</u>	_____
<u>34638</u>	_____

Name and Title: <u>Rebecca A. Irwin, Sec.</u>	Name and Title: _____
Address: <u>400 Chaney Rd., #1016</u>	Address: _____
<u>Smyrna, TN 37167</u>	_____

Name and Title: _____	Name and Title: _____
Address: _____	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: Myron Golden
Address: 21215 Tyrell Way
Land O Lakes, FL 34638

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Rebecca A. Irwin
Address: 400 Chaney Rd., #1016
Smyrna, TN 37167

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

3/6/2015
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

3/6/2015
Date