(Requestor's Name) (Address)	
(Address)	700270660037
(City/State/Zip/Phone #)	
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(Business Entity Name)	
(Document Number)	
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Office Use Only	

COVER LETTER

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

SUBJECT: The Temple of Truth Gospel Baptist Church (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 Status

■\$78.75 Filing Fee & Certified Copy

State State

ADDITIONAL COPY REQUIRED

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



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FLORIDA DEPARTMENT OF STATE 161 LABOR DEFINITIAN Division of Corporations

March 23, 2015

THE TEMPLE OF TRUTH GOSPEL BAPTIST CHURCH 2816 STONEWOOD CIR LAKELAND, FL 33810

SUBJECT: THE TEMPLE OF TRUTH GOSPEL BAPTIST CHURCH Ref. Number: W15000020182

We have received your document for THE TEMPLE OF TRUTH GOSPEL BAPTIST CHURCH and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name must contain a word that will clearly indicate that it is a corporation. This word may be: CORPORATION, CORP., INCORPORATED, or INC. Sections 617.0401(1)(a) and 617.1506(1), Florida Statutes, prohibits the use of the word COMPANY or CO. in the name of a non-profit corporation.

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.

Please return 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.

Jessica A Fason Regulatory Specialist II

Letter Number: 015A00005782

www.sunbiz.org

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	itle: PRESIDENT, JAMESLucket Name and Title: 809 DOVERIDGE DR Address:	VICE PRESIDENT Reggie Guiner
Address		Dant City Fl 33567
Name and Tit	ILE <u>Familierie</u> Hamilton Directors OF 1219 AUBERT KING HIGH Address:	Sandry Gainer Sechetary
Address	1219 AUBERT KING HIGH Address:	2816 STONEWOOD PR CIRCLE
	LANELAND EL DRIVE	LAKELAND FI 33810
	33805	

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Address: JAMES LUCKETT 809 DOVE Ridge DR LAKE HAUD FLA 33803

ARTICLE VII INCORPORATOR The name and address of the Incorporator is: MES Name: DR નજી Address: 338ø3 **F**(IAN ĽO

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, ham familiar with and accept the appointment as registered agent and agree to act in this capacity

Required Signature of Registered Agent

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 felopy as provided for in s.817.155, F.S.

Required Signature of Incorporator

3/17/2015 Date

3/17/2015 Date

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