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SECRETARY OF STATE

U3.

COVER LETTER

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

SUBJECT: GOOD NEWS Christian Ministries COTD
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is an original a	and one (1) copy of the Ar	ticles 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:	Henry Campfield Name (Printed or typed)
	282 water oak Dr.
	Tallahassee fl 32301
	City, State & Zip
	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 INCORPORATION
In compliance with Chapter 617, F.S., (Not for Profit)

ARTICLE I NAME The name of the corporation shall be: GOOD NEW	S. Christian Ministries Corp
ARTICLE II PRINCIPAL OFFICE	2015 SEC TALL
Principal street address: 7-82-WAYEN OAK DY	Mailing address, if different is A
TALLAHALBEE F1. 32385	
ARTICLE III PURPOSE The purpose for which the corporation is organized is: ARTICLE III PRECHE THE GOSPEL OF GOOD WORK TAIL	ESTAMINT CHURCH
ARTICLE IV MANNER OF ELECTION The manner in which the	he directors are elected and appointed: BU
YOTE OF AW MEMBE	GRS T
APPROVE II INTERNAL OPERAPES AND OP PURPOSEDES	
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS	
Name and Title: Henry Compried (D) Name and Title	le: William Rollins (TD)
Address 5860 Charlie + Jannie Address:	1120 Bennett St.
Terrace	Tallahossee F1 32302
Tallahasse, Fl 32312	
Name and Title: Elogia Compfield (AS) Name and Tit	le: Marrissa Kenion (D)
Address 5860 Charlie + Jamie Address:	
Terrace	Terrace
Tallahassee, +1 32312	Tallahassec fl 32312
Name and Title: Anthony Kenion (T) Name and Tit	
Address 1391 Drane Smith Rd. Address:	
Bainbridge, GA 39891	

Name and Title:_	Name and Title:
Address	Address:
_	
Name and Title:	Name and Title:
Address	Address:
_	
	· · · · · · · · · · · · · · · · · · ·
ARTICLE VI	REGISTERED AGENT
	orida street address (P.O. Box NOT acceptable) of the registered agent is:
Name:	Henry compfield
Address:	5860 Charlie + Jannie Terrace
	Tallahassee fl 32312
ARTICLE VII	INCORPORATOR dress of the Incorporator is:
Name:	Henry Compfield
Address:	5860 Charlie & Junnie Terrace
	Tallahassee fl 32312
	ned as registered agent to accept service of process for the above stated corporation at the place designated in this imiliar with and accept the appointment as registered agent and agree to act in this capacity
Herr	Required Signature of Registered Agent Date
	u ment 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.
Henry	Required Signature of Incorporator Date