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PICK-UP WAIT MAIL
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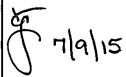
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COVER LETTER

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

UBJECT:						
	(PROPOSED CORF	ORATE NAME – <u>MUST IN</u>	CLUDE SUFFIX)			
Enclosed is an original and	l one (1) copy of the Ar	ticles of Incorporation and	l 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 CO	DPY REQUIRED			
FROM:		ouise Haralson me (Printed or typed)	_			
	-					
	1153 N. Virginia Ave Address					
	Lakeland, FI 33805					27 t
	City, State & Zip		_		1	T m
	(863) 802-0908			in the service of	P	C
	Daytime Telephone number			1		

Louise Haralson Ministries Inc.

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

pastorharalson@yahoo.com

E-mail address: (to be used for future annual report notification)



FLORIDA DEPARTMENT OF STATE Division of Corporations

June 12, 2015

LOUISE HARALSON 1153 N. VIRGINIA AVENUE LAKELAND, FL 33805

SUBJECT: LOUISE HARALSON MINISTRIES

Ref. Number: W15000041157

We have received your document for LOUISE HARALSON MINISTRIES 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 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.

The purpose contained in your articles of incorporation should be more specific. Please correct your articles to reflect the specific purpose for which the non profit corporation is being organized.

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 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.

Claretha Golden Regulatory Specialist II New Filing Section

Letter Number: 815A00012407

ARTICLES OF INCORPORATION

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

ARTICLE I	NAME the corporation shall be:	Louise Haralson Ministries	FAC.	
	PRINCIPAL OFFICE			15 JUL -7 PM 1: 18
	Principal <u>street</u> address: 3 North Virginia Ave		Mailing address, i	fdifferent is SOFE,阿克莱克
Lak	eland, Fl 33805			
	I PURPOSE for which the corporation is organize	Outreach Ministry ed is:	SEE ATTACHE	D
-,	· · · · · · · · · · · · · · · · · · ·			
				·
ARTICLE II ARTICLE V		The manner in which the directors of the manner in which the manner in the manner in which the manner in which the manner in the manner in which the manner in the manner	are created that approximately	
Name and Ti	Pastor Louise Haralson/ Preside	ent Name and Title:		
Address	Lakeland Fl, 33805	Address:		
Name and Ti	tle:	Name and Title:		
Address		Address:		
Name and Ti	tle:	Name and Title:		
Address		Address:		

Our Purpose

To restore hope and provide opportunities for people to become all that God intends them to be; partner with the local church to put Christian faith into action through service to the community.

Our mission focus is serving the most vulnerable children, teens and families in Polk County.

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Name and Title:_	' Iq ~ ~;	Name and Title:	
Address		Address:	
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_	,		
Name and Title:_		Name and Title:	
Address		Address:	
			
ARTICLE VI	REGISTERED AGENT		
	orida street address (P.O. Box NOT acce	eptable) of the registered agent is:	
Name:	Louise Haralson		
Address:	1153 N Virgina Ave	**************************************	
	Lakeland, Fl 33805	元	
			-1
ARTICLE VII	<u>INCORPORATOR</u>	7	(SIG
The name and ad	dress of the Incorporator is:	2	Š
Name:	Louise Haralson		
Address:	1153 N. Virgina Ave		;
	Lakeland Fl. 33805		
	EFFECTIVE DATE:		
	other than the date of filing:ate is listed, the date must be specific an	nd cannot be more than five business days prior or 90 be	usiness days
	inserted in this block does not meet the apive date on the Department of State's reco	applicable statutory filing requirements, this date will not be cords.	listed as the
•		of process for the above stated corporation at the place d as registered agent and agree to act in this capacity	lesignated in this
. /)	Harolson		
Dollise	Required Signature of Registered	<u>6/3/20</u> d Agent Date	73
	ment and affirm that the facts stated here tof State constitutes a third degree felony	rein are true. I am aware that any false information submitte o as provided for in s.817.155. F.S.	ed in a document
Λ-		-	1.0
Dollise	Haralson Required Signature of Incomp	$\frac{6/3/20}{\text{Date}}$	<u> </u>