

N15000010162

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

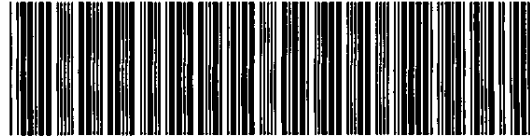
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09/08/15--01036--003 \*\*78.75

N15-62027

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

15 OCT 15 PM 1:09

FILED

T. Burch OCT 19 2015

## COVER LETTER

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

SUBJECT: Livingwater Ministry 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: Annette Jordine  
Name (Printed or typed)

2262 SE Mariola Ave  
Address

Port Saint Lucie, FL 34952  
City, State & Zip

772-267-2483  
Daytime Telephone number

Jordinea@gmail.com  
E-mail address: (to be used for future annual report notification)

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

15 SEP 29 AM 11:56

September 18, 2015

ANNETTE JORDINE  
2262 SE MARIOLA AVE  
PORT SAINT LUCIE, FL 34952

SUBJECT: LIVING WATER MINISTRY INC.  
Ref. Number: W15000062027

We have received your document for LIVING WATER MINISTRY INC. 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 designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

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.

Tim Burch  
Regulatory Specialist II

Letter Number: 315A00019738



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

RECEIVED

15 OCT 15 AM 11:26

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

October 1, 2015

ANNETTE JORDINE  
2262 SE MARIOLA AVE  
PORT SAINT LUCIE, FL 34952

SUBJECT: LIVING WATER FAITH MINISTRY INC  
Ref. Number: W15000062027

We have received your document for LIVING WATER FAITH MINISTRY INC and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

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.

Tim Burch  
Regulatory Specialist II

Letter Number: 915A00020779

# ARTICLES OF INCORPORATION

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

## ARTICLE I. NAME

The name of the corporation shall be: God's House Of Living Water Fellowship Inc

## ARTICLE II. PRINCIPAL OFFICE

Principal street address:

2262 SE Mariola Ave  
Port Saint Lucie, FL  
34952

Mailing address, if different is:

## ARTICLE III. PURPOSE

The purpose for which the corporation is organized is: The purpose of Living Water Ministry  
is to impact lives and make a difference in the community. Living Water  
Ministry is founded on scripture. John 7:38 "He that believeth on me, as  
the scripture hath said, out of his belly shall flow rivers of living water". We  
will be operating on God's principles and will using various ministries to  
help shape the community. The goal is to have compassion, renew trust and  
restore faith in God. Ministries will offer help according to family needs

ARTICLE IV. MANNER OF ELECTION The manner in which the directors are elected and appointed: They  
will be appointed

## ARTICLE V. INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Annette Jordine - President Name and Title: \_\_\_\_\_

Address: 2262 SE Mariola Ave Address: \_\_\_\_\_  
Port Saint Lucie  
FL 34952

Name and Title: Basil Jordine - VP, Treasure Name and Title: \_\_\_\_\_

Address: 2262 SE Mariola Ave Address: \_\_\_\_\_  
Port Saint Lucie  
FL 34952

Name and Title: Brittini Jordine - Sec. Name and Title: \_\_\_\_\_

Address: 2262 SE Mariola Ave Address: \_\_\_\_\_  
Port Saint Lucie, FL  
34952

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TALLAHASSEE, FLORIDA

## Article III

or the needs of the community, for example meals, clothing, counseling and outreach. <sup>God's House of</sup> Living Water <sup>Fellowship, Inc</sup> Ministry will be a pillar in the community; where the doors are open to everyone. This will be a house of refuge, hope, love, restoration, and worship. All will be welcomed with open arms.

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TALLAHASSEE, FLORIDA

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: Kia Reese

Address: 104 Carol Susan Lane

Fort Pierce, FL 34982

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Stephanie Ellis

Address: 1351 Ladner

Port Saint Lucie, FL 34983

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

Kia Reese

Required Signature of Registered Agent

9/2/2015

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.

Ellis

Required Signature of Incorporator

9/2/2015

Date

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TALLAHASSEE, FLORIDA