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EFFECTIVE DATE 16/12/15



FLORIDA DEPARTMENT OF STATE Division of Corporations RECEIVED OCT 19 2015

July 16, 2015

Į,

EDNA PARKER 268 N.W. 11TH STREET APT. 304 MIAMI, FL 33136

SUBJECT: THE PROPHETIC WORD OF GOD MINISTRIES

Ref. Number: W15000047708 CO PERMIT

We have received your document for THE PROPHETIC WORD OF GOD MINISTRIES 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.

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.

A corporation may not serve as its own incorporator. Please designate the individual whose typed signature appears on the signature line.

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.

Thomas Chang Regulatory Specialist II New Filing Section

Letter Number: 315A00014929

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COVER LETTER

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

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	ords Of Life Ministries Inc.
ARTICLE II PRINCIPAL OFFICE	
Principal street address: 268 N.W 11 Street N	101304 P.O. BOX 13096
Miami Florida	Miami FL, 3318/
2 p. Code 33/36	
word of God to the You eil age groups. My Purp first God and educe with Family and Chi in Organizations to beth Life lession and Lifes J	of Teach and Educate the oth and Young Adults as well as pose is to better the Community be exten. To instruct the youth ildren. My purpose is to bring the help them to cope with Jurney, to have a sure fandion are in which the directors are elected and appointed: I Educe of appoint with Deacon
ARTICLE V INITIAL OFFICERS AND/OR DIRECTO	·
Name and Title: Ednia Parker Sr-Paster	Name and Title: Carolyn Woodory (En-
Address 268 NW 11 Street Apt 304. Miami FL .	Address: 1251 ruw 53 Street Miami FL 33142
Name and Title: Tiffany Codwell	Name and Title: Michael Pough
Address Teacher. 2486 NW 179th Street Micani FL.	Address: Treasure, 7901 NW 7NG Apt 1010
Name and Title: Jimmy Moore,	Name and Title:
Address <u>Degcon 268 NW</u> 11 Street Apt 304	Address:
miami Fh 33636	

Name and Title:		Name and Title:		.	
Address	,	Address:			
		. <u> </u>		_	
-	· · · · · · · · · · · · · · · · · · ·				
Name and Title:		Name and Title:			
Address		•			
_		, 11441000.			
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-				·	
ARTICLE VI The name and F	REGISTERED AGENT lorida street address (P.O. Box NOT acce	otable) of the register	red agent is:	٠	•
Name:	Edna Parker				
Address:	268 NW 11 Stree	et Matzal	,		
	Miami FL 3313	•		ਹੀ	. Xiss Siss
·		([•	8	
ARTICLE VII	INCORPORATOR Idress of the Incorporator is:			्रें	است مار سد مار سمع مر
Name:	Edna Parker			To Make the second seco	
Address:	268 NW 11 Street A	nt 304		==	NASTA MATS
Addiess.	Miami Fh 33131			رر .	SNOL
Effective date, if	EFFECTIVE DATE: other than the date of filing: 10-12- late is listed, the date must be specific an	d cannot be more t	(OPTIONAL) han five business days prior or 90 b	usiness	days
Note: If the date document's effect	inserted in this block does not meet the ap tive date on the Department of State's reco	plicable statutory fil rds.	ing requirements, this date will not be	listed a	s the
andificata I am	ned as registered agent to accept service of amiliar with and accept the appointment at the control of Registered Signature of Registered	*_4 # 4	d agree to act in this capacity	-	
	Required Signature of Registered	Agent	10-12 - Date	201	إ
I submit this doc	ument and affirm that the facts stated here it of State constitutes a third degree felony i	in are true. I am aw	are that any false information submit 817.155, F.S.	ted in a	document
20	en Poulee		>	20 L	.5
	Required Signature of Incorp	oorator	10-12- Date	~~ ~	پ