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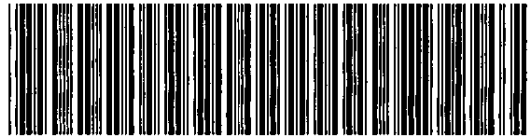
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T. SCOTT



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COVER LETTER

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

SUBJECT: Strong Tower of Faith Ministry International, Incorporated

(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: Doug Curtis

Name (Printed or typed)

5675 English Oak Drive South

Address

Jacksonville, Florida 32244

City, State & Zip

904-994-8859

Daytime Telephone number

dw_curtis@yahoo.com

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: Strong Tower of Faith Ministry International, Incorporated

ARTICLE II PRINCIPAL OFFICE

Principal street address:
5675 English Oak Drive South

Jacksonville, Florida 32244

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To operate exclusively for religious, educational and distinct ecclesiastical purposes. To conduct a local church by the direction of the
Lord Jesus Christ and under the leadership of the Holy Spirit.

ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected and appointed: Appointed by Pastors

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Doug Curtis-President Name and Title: _____

Address: 5675 English Oak Drive South Address: _____
Jacksonville, Florida 32244

Name and Title: Tiw Taylor-Vice President Name and Title: _____

Address: 5675 English Oak Drive South Address: _____
Jacksonville, Florida 32244

Name and Title: J. Norman Sapp, Jr.-Treasurer Name and Title: _____

Address: 544 Willow Walk Place Address: _____
Saint Augustine, Florida 32086

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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: Doug Curtis

Address: 5675 English Oak Drive South
Jacksonville, Florida 32244

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: Doug Curtis

Address: 5675 English Oak Drive South
Jacksonville, Florida 32244

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

x Doug W Curtis
Required Signature of Registered Agent

x 10-7-2015
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.

x Doug W Curtis
Required Signature of Incorporator

x 10-7-2015
Date