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15 NOV - 6 AM 10:45
SECRETARY OF STATE
TALLAHASSEE FLORIDA

NOV - 6 2015
T SCHROEDER

COVER LETTER

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

SUBJECT: Dwelling Place Church Orlando, 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: Alfred Thurman
Name (Printed or typed)

5229 Millenia Blvd. #303
Address

Orlando, FL 32839
City, State & Zip

850-363-5976
Daytime Telephone number

alfred@themorningvoice.org
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: Dwelling Place Church Orlando, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address:
5229 Millenia Blvd. #303

Orlando, FL 32839

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To provide a biblical sound worship experiance
that facilitates the edification of attending believers and facilitate the spiritual
growth and maturity of believers through curriculums that are designed to
maximize the yield of spiritual fruit in their lives.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected and appointed:

As set forth in the bylaws

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Alfred Thurman- President/Director
Address: 5229 Millenia Blvd. #303
Orlando, FL 32839

Name and Title: Raul Fernandez- Treasurer/Director
Address: 5229 Millenia Blvd. #303
Orlando, FL 32839

Name and Title: Maria Fernandez- Secretary/Director
Address: 5229 Millenia Blvd. #303
Orlando, FL 32839

Name and Title: Shontessia Thurman- Director
Address: 5229 Millenia Blvd. #303
Orlando, FL 32839

Name and Title: Anthony Cottom- Director
Address: 5229 Millenia Blvd. #303
Orlando, FL 32839

Name and Title: _____
Address: _____

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

15 NOV - 6 AM 10:45

APPROVED
AND
FILED

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: Alfred Thurman
Address: 5229 Millenia Blvd. #303
Orlando, FL 32839

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Alfred Thurman
Address: 5229 Millenia Blvd. #303
Orlando, FL 32839

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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

Alfred Thurman
Required Signature of Registered Agent

11/6/15
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.

Alfred Thurman
Required Signature of Incorporator

11/6/15
Date