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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

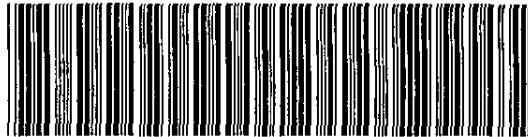
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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16 JAN 22 AM 11:26

FEB 3 2016

T. SCOTT



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 15, 2015

FRESH START VISION MINISTRIES
16970 NW 22ND ST.
BLOUNTSTOWN, FL 32424

SUBJECT: FRESH START VISION MINISTRIES
Ref. Number: W15000059567

We have received your document for FRESH START VISION 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 title(s) in the officer/director field(s) is/are not acceptable. Please refer to the following link for acceptable officer/director title information.
<http://www.sunbiz.org/titledef.html>.

If your business entity does not intend to transact business until January 1st of the upcoming calendar year, you may wish to revise your document to include an effective date of January 1st. If you do not list an effective date of January 1st, your business entity will become effective this calendar year and it will be required to file an annual report and pay the required annual report fee for the upcoming calendar year this coming January, which is merely weeks away. By listing an effective date of January 1st, the entity's existence will not begin until January 1st of the upcoming year and will, therefore, postpone the entity's requirement to file an annual report and pay the required annual report filing fee until the following calendar year.

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.

Tyrone Scott
Regulatory Specialist II
New Filings Section

Letter Number: 915A00021200

COVER LETTER

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

Fresh Start Vision Ministries, Inc

SUBJECT:

(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: Fresh Start Vision Ministries, Inc

Name (Printed or typed)

16970 Nw 22nd St

Address

Blountstown, fl 32424

City, State & Zip

850-867-0994

Daytime Telephone number

pastor@freshstartbt.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

Fresh Start Vision Ministries, Inc

The name of the corporation shall be: _____

ARTICLE II PRINCIPAL OFFICE

Principal street address:
16970 NW 22Nd St.

Mailing address, if different is:

Blountstown, Fl 32424

ARTICLE III PURPOSE

to spread the gospel of Jesus Christ with the Holy Bible as our foundation.

The purpose for which the corporation is organized is:
To educate spiritually, socially, and emotionally thought biblical teaching. We will have weekly services. We will teach our youth and adults how to be disciples of Jesus. we will also serve as an umbrella for others churches and establish churches.

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ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected and appointed: _____
By vote of all current directors.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:	Matthew Mitchell, President/	Name and Title:	Shameka Mitchell, Vice President
Address	1006 Nottingham Dr.	Address:	1006 Nottingham Dr.
	Panama City, Fl		Panama City, Fl
	Executive director		Asst, executive director
Name and Title:	Arzella Smith, Financial Secetary	Name and Title:	Mary Wiliams, Operations director
Address	P.O. Box 35	Address:	727 Catus Ave
	Blountstown, Fl		Panama City, Fl
Name and Title:	Yaminah Ivory, Treasurer	Name and Title:	
Address	20926 SE Azalea Dr.	Address:	
	Blountstown, fl		

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: Matthew Mitchell

Address: 1006 Nottingham Dr.

Panama City, FL 32401

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Matthew Mitchell

Address: 1006 Nottingham Dr.

Panama City, FL 32401

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

Matthew Mitchell
Required Signature of Registered Agent

1-10-16
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.

Matthew Mitchell
Required Signature of Incorporator

1-10-16
Date