N16600001624

and the second s		
(Red	uestor's Name)	
(Add	Iress)	
·	•	
/A.II.		
(Add	iress)	
(City	//State/Zip/Phone	∋ #)
PICK-UP	☐ WAIT	MAIL
(Rus	iness Entity Nan	ne)
(Dus	iniess Entity (van	ne,
(Doc	cument Number)	
Certified Copies	Certificates	of Status
<u> </u>		
Special Instructions to F	iling Officer:	
		Λ.
		J.Y
		Υ

Office Use Only



200280350442

01/04/16--01048--012 **70.00

02/18/16--01001--016 **8.75

W16-2098

SEDIC TOLY DI STATE

16 FEB 17 PM W S(

12-18-14

COVER LETTER

(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)

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

SUBJECT:

Enclosed is an original a	and one (1) copy of the Ar	ticles of Incorporation and	a check for:	 I
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	#\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate	
	<u>.</u>	ADDITIONAL CO	PY REQUIRED	976 AUG - 1/1 C State

The Redeemed Christian Church of God---The Healing Balm Of Christ Chapel

FROM:	Lorna White		
	Name (Printed or typed)		
	5317 Curry Ford RD APT. P 203		
	Address		
	Orlando, FL 32812		
	City, State & Zip		
	407-431-7449		
	Daytime Telephone number		
	LOISWHITE634@GMAIL.COM		
	E-mail address: (to be used for future annual report notification)		

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



January 13, 2016

LORNA WHITE 5317 CURRY FORD RD APT P 203 ORLANDO, FL 32812

SUBJECT: THE REDEEMED CHRISTIOAN CHURCH OF GOD--THE

HEALING BALM OF CHRIST CHAPEL

Ref. Number: W16000002098

We have received your document for THE REDEEMED CHRISTIOAN CHURCH OF GOD--THE HEALING BALM OF CHRIST CHAPEL and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

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.

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: 316A00000884

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

	PRINCIPAL OFFICE		
<u>ARTICLE II</u>			
531	Principal <u>street</u> address: 7 Curry Ford RD.	Mailing address, if different is:	
AP	T. P 203		
Orl	ando, FL 32812		
	I PURPOSE for which the corporation is organized is: ing the values of the Christian faith and the		hurch of God.
			න <u> </u>
<u>ARTICLE IJ</u>	/ MANNER OF ELECTION The m.	Annually by manner in which the directors are elected and appointed: Annually by the directors are elected and appointed:	y appointmen
ARTICLE V	INITIAL OFFICERS AND/OR DIRI	ECTORS 2	3 5
	Lorna White (Pastor/President)	ECTORS >	÷ J
ARTICLE V Name and Ti Address	Lorna White (Pastor/President)		÷ J
Name and Ti	tle:White (Pastor/President)	ECTORS Name and Title:	÷ J
Name and Ti	tle: Lorna White (Pastor/President) 5317 Curry Ford RD.	ECTORS Name and Title:	÷ J
Name and Ti Address	tle: Lorna White (Pastor/President) 5317 Curry Ford RD. APT. P 203 Orlando, FL 32812 Ama Tafawa (Director)	Name and Title: Address:	÷ J
Name and Ti Address Name and Ti	tle: Lorna White (Pastor/President) 5317 Curry Ford RD. APT. P 203 Orlando, FL 32812 Ama Tafawa (Director)	Name and Title: Name and Title: Name and Title:	÷ J
Name and Ti Address Name and Ti	tle: Lorna White (Pastor/President) 5317 Curry Ford RD. APT. P 203 Orlando, FL 32812 Ama Tafawa (Director)	Name and Title: Address:	÷ J
Name and Ti Address Name and Ti	tle: Lorna White (Pastor/President) 5317 Curry Ford RD. APT. P 203 Orlando, FL 32812 tle: Ama Tafawa (Director) 5325 Curry Ford RD.	Name and Title: Name and Title: Name and Title:	÷ J
Name and Ti Address Name and Ti Address	tle: Lorna White (Pastor/President) 5317 Curry Ford RD. APT. P 203 Orlando, FL 32812 tle: Ama Tafawa (Director) 5325 Curry Ford RD. Apt. D 202 Orlando, FL 32812	Name and Title: Address: Name and Title: Address:	÷ J
Name and Ti Address Name and Ti Address	tle: Lorna White (Pastor/President) 5317 Curry Ford RD. APT. P 203 Orlando, FL 32812 tle: Ama Tafawa (Director) 5325 Curry Ford RD. Apt. D 202 Orlando, FL 32812	Name and Title: Address: Name and Title: Address:	÷ J
	tle: Lorna White (Pastor/President) 5317 Curry Ford RD. APT. P 203 Orlando, FL 32812 Ama Tafawa (Director) 5325 Curry Ford RD. Apt. D 202 Orlando, FL 32812 Ile: Geraldine Allen (Treasurer)	Name and Title: Address: Name and Title: Address:	÷ J

Name and Title:		Name and Title:			_		
Address _		Address:			-		
-					-		
_					_		
Name and Title:		Name and Title:			_		
Address					_		
					_		
_					_		
	REGISTERED AGENT	4-k1-> - C4k :'-	and a second to				
Name:	lorida street address (P.O. Box NOT accep Lorna White	table) of the regis	tered agent is:	E Co	=		
Address:	5317 Curry Ford RD. Apt. I	P 203			<u> </u>		
Address.	Orlando FL, 32812		·		8 7	CONTRACTOR OF THE PARTY OF THE	
					32 .		
	INCORPORATOR Idress of the Incorporator is:				1.	Toronto de la constante de la	
Name:	Lorna White			3 55	50		
Address:	5317 Curry Ford RD. Apt. l	P 203					3. e ma
	Orlando FL, 32812						
	EFFECTIVE DATE:						
	other than the date of filing:ate is listed, the date must be specific and		(OPTIONAL) e than five business days prior	or 90 t	ousiness	days	
	inserted in this block does not meet the app tive date on the Department of State's recor		filing requirements, this date wil	I not be	e listed a	s the	
	ned as registered agent to accept service of amiliar with and accept the appointment as				designa	ted in this	
	LONTE.		_ 02/	08	116		
	Required Signature of Registered A	Agent		Date /	/	_	
	iment and affirm that the facts stated hereii t of State constitutes a Hird degred felony a			submit	ted in a	document	
·	(OLT	-		051	116		
	Required Signature of Incorp	orator	– /	Date		-	