N16000000715

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

000281821290

02/10/16--01005--017 **70.00

FILED
16 FEB 10 PM 8:30
SECRETARY OF STATE
TALLAHASSEE FLORIDA

NP

FEB 19 2016

R. WHITE

COVER LETTER

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

SUBJECT: I Aministries, 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: Regina L. Peeples
Name (Printed or typed)

P.O. Box 114
Address

Fruitland Park, FL 34731
City, State & Zip

352-516-5141
Daytime Telephone number

iamminstries@aol.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

FILED

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

16 FEB 10 PM 8:30

SECRETARY OF STATE
TALLAHASSEE FLORIDA

ARTICLE I NAME

The name of the corporation shall be: I Aministries, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal **street** address:	Mailing address, if different is:
556 Paulling Drive	P. O. Box 114
Leesburg, FL 34748	Fruitland Park, FL 34731

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: to operate exclusively for charitable, religious, scientific, literary, and educational purposes. Such purposes shall include, but not limited to shedding light on the darkness of childhood sexual abuse that are prevalent in our families, homes, communities, churches, and schools through awareness, education, and prevention, Such purposes and activities shall be limited in all events to exempt purposes described in section 501 (c) (3) of the Internal Revenue Code of 1986 (or the corresponding provision of any future United States Internal Revenue Law).

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

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Regina L. Peeples(President)	Name and Title: Gloria E. Austin(Treasure)
Address 556 Paulling Drive	Address: 4171 Close Ct.
Leesburg, FL 34748	Mt. Dora, FL 32757
Name and Title: Norma J. King(Secretary)	Name and Title: Larisa Hobbs
Address 213 Lemon Street	Address: 3967 Pebble Brooke Circle South
Wildwood, FL 34785	Orange Park, FL 32065
Name and Title: Teron A. Wallace	Name and Title:
Address 556 Paulling Drive	Address:
Leesburg, FL 34748	

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: Regina L. Peeples

Address: 556 Paulling Dr.

Leesburg, FL 34748

ARTICLE VII INCORPORATOR

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

Name: Regina L. Peeples

Address: 556 Paulling Dr.

Leesburg, FL 34748

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

_____ 2-5-16

Required Signature of Registered Agent — 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.

_____ 2-5-16

Required Signature of Incorporator — Date