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COVER LETTER

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

SUBJECT: 24:7 MINIS	IRY FOR WOMEN, INC.			
	(PROPOSED CORPO	RATE NAME – <u>MUST IN</u>	CLUDE SUFFIX)	
			٠	
		,	•	
Enclosed is an original a	and one (1) copy of the Artic	cles of Incorporation and	a check for:	
	() 113	[· · · · · · · · · · · · · · · · · · ·		
\$70.00	\$78.75	□\$78.75	■ \$87.50	
Filing Fee	Filing Fee &	Filing Fee	Filing Fee,	
Ü	Certificate of	& Certified Copy	Certified Copy	
•	Status		& Certificate	
		ADDITIONAL COPY REQUIRED		
		<u> </u>		
	24:7 Ministry To Women, Inc.			
FROM:			-	
	Name (Printed or typed)			
512 E Nebraska Street				
	Address			
		r mai voo		
	Bonifay, FL 32425			

850-547-3785

jtippit@gmail.com

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

E-mail address: (to be used for future annual report notification)

City, State & Zip

Daytime Telephone number

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

ARTICLE I The name of the	NAME 24:7 MINISTRY TO	WOMEN, INC.	·	
ARTICLE II	PRINCIPAL OFFICE		\C	
	Principal street address:		Mailing address, if different is 7	ी () व्यक्ताप
512 E	Nebraska Street		Walling address, it different is $S > S > S > S > S > S > S > S > S > S $	-
Bonif	ay, FL 32425		no R in	ľ
ARTICLE III The purpose fo	PURPOSE r which the corporation is organized is:	7 Ministry To Wo	men, Inc. enables contributors to support the	
	•	incarcerated wom	en and receive a tax deductible benefit. 24:7 Ministry	— То
Women, Inc. p	provides funding for facilities, activities and	educational progr	ams for the women it serves while assisting them with	 th
	s needed to better themselves and their famil			_
			ling up of its officer, the greate shall be distributed	
•			ling up of its affairs, the assets shall be distributed	_
exclusively to	charitable organizations that then qualify for	r exemption under	r the provisions of Section 501(c)(3) of the Code, as	
determined by	a plan of dissolution or distribution by the E	Board of Directors	s of the 24:7 Ministry To Women, Inc.	
ARTICLE IV	MANNER OF ELECTION The manner	r in which the dire	ctors are elected and appointed: As stated in bylaws.	
ARTICLE V	INITIAL OFFICERS AND/OR DIRECTO	<u>ORS</u>		
Name and Title	Lynn Adams	Name and Title	Tracy Barbee - Secretary	
Address	620 Odom Road	Address:	915 Nearing Hills Road	
Address	Chipley, FL 32428	-	Chipley, FL 32428	
Name and Title	Linda Booth - Chairman	- Name and Title	Chris Geise - Treasurer	
	1828 Laster Road		512 E. Nebraska Street	
Address	Chipley, FL 32428	_ Address:	Bonifay, FL 32425	
N 177'-1	Sandra Hardin	-	Carol Harrell	
Name and Title	2333 Pineview Drive	Name and Title	2329 Pineview Drive	
Address	Bonifay, FL 32425	_ Address:	Bonifay, FL 32425	
		_		

Name and Title	Beverly Helms	Name and Title	Gretchen Tindell	
Address _	PO Box 728	Address:	2972 Liberty School Rd	
	Bonifay, FL 32425	-	Bonifay, FL 32425	
Name and Title	Jean Tippit	Name and Title	Juanita Wilson - Vice Chr	_
Address	209 E. Virginia Avenue	Address:	1502 Brackin Road	
	Bonifay, FL 32425		Westville, FL 32464	-
ARTICLE VI The name and Name:	REGISTERED AGENT Florida street address (P.O. Box NOT acce Jean Tippit	eptable) of the regi	stered agent is:	
Address:	209 E. Virginia Avenue		- ·	
	Bonifay, FL 32425		<u>≯</u> , Em □ 0	5
	INCORPORATOR address of the Incorporator is: Sandra Hardin 2333 Pineview Dr Bonifay, FL 32425		HASSEE.FLORIDA	MAR 23 PH (1 50
Effective date,	if other than the date of filing: date is listed, the date must be specific ar .)	nd cannot be mo	(OPTIONAL) re than five business days prior or 9	0 business days
	te inserted in this block does not meet the apective date on the Department of State's reco		filing requirements, this date will no	t be listed as the
	amed as registered agent to accept service Namiliar with and accept the appointment of		t and agree to act in this capacity 7	
	Required Signature of Registered ocument and affirm that the facts stated here end of State constitutes a third degree felony	ein are true. I am	Data ware that any false information sub	<u>QO //6</u> e mitted in a document
	Sanglia Vardin Required Signature of Incom	rporator	3/di	0/16 nte