

N16000003286

(Requestor's Name)

(Address)

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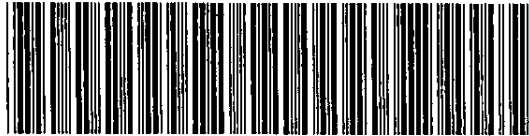
(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____



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Special Instructions to Filing Officer:

Office Use Only
W16000003286

APR 06 2016

T. SCOTT

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
16 MAR 29 AM 10:00



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 25, 2016

REV EDWARDS
2895 NW 69 AVE
MARGATE, FL 33063

SUBJECT: AGAPE MISSIONS INTERNATIONAL, INC.
Ref. Number: W16000002179

We have received your document for AGAPE MISSIONS INTERNATIONAL, INC. and your check(s) totaling \$91.50. 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.

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>.

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.

Tyrone Scott
Regulatory Specialist II

Letter Number: 116A00005648

COVER LETTER

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

SUBJECT: AGAPE MISSIONS INTERNATIONAL, 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

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input checked="" type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate
ADDITIONAL COPY REQUIRED	

FROM: REV. AZARIAH EDWARDS
Name (Printed or typed)

2895 NW 69 AVE
Address

MARGATE, FL 33063
City, State & Zip

860 881 4017
Daytime Telephone number

AZARIEDWARDS@ATTI.NET
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: AGAPE MISSIONS INTERNATIONAL, INC

ARTICLE II PRINCIPAL OFFICE

Principal street address:

2895 NW 69 AVE
MARGATE FL, 33063

Mailing address, if different is:

P.O. BOX 670654
CORAL SPRINGS, FL 33067

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: TO EVANGELIZE LOCAL AND FOREIGN MISSIONS, PLANT CHURCHES, TRAIN DISCIPLES AND ASSIST IN EDUCATION AND HEALTH CARE

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected and appointed: By

SECRET BALLOTS

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: REV. AZARIAH EDWARDS PRES.

Address: 2895 NW 69 AVE
MARGATE, FL 33063

Name and Title: REV. NESSA C. ORAM-EDWARDS, SEC.

Address: 2895 NW 69 AVE
MARGATE, FL 33063

Name and Title: CHERRY MAITLAND TREES

Address: 7700 NW 23RD ST
MARGATE, FL 33063

Name and Title: DR BEVERLY COKER, ^{DIRECTOR} ~~SECRETARY~~

Address: 2 SABRINA DR
WINDSOR, CT 06095

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
16 MAR 29 AM 10:00

Name and Title: KAVIN L. EDWARDS OFFICER Name and Title: _____

Address: 15 MERRIT DR Address: _____
ORADELL, NJ 07649

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:

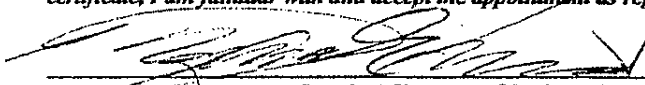
Name: REV AZARIAH EDWARDS
Address: 2895 NW 69 AVE
MARGATE, FL 33063

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is: REV AZARIAH EDWARDS

Name: ~~AGAPE QUESTIONS INTERNATIONAL INC~~
Address: 2895 NW 69 AVE
MARGATE, FL 33063

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



Required Signature of Registered Agent

12/28/15

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.



Required Signature of Incorporator

10/28/15

Date