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| (Re | questor's Name) | |
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| PICK-UP | ☐ WAIT | MAIL |
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| Certified Copies | _ Certificates | of Status |
| Special Instructions to Filing Officer: | | |
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SECRETARY OF STATE



FLORIDA DEPARTMENT OF STATE Division of Corporations

March 17, 2016

RONNIE L KING 7819 N 50TH STREET TAMPA, FL 33617

SUBJECT: CHRIST WAY BIBLE INSTITUTE

Ref. Number: W16000020165

We have received your document for CHRIST WAY BIBLE INSTITUTE and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name must contain a word that will clearly indicate that it is a corporation. This word may be: CORPORATION, CORP., INCORPORATED, or INC. Sections 617.0401(1)(a) and 617.1506(1), Florida Statutes, prohibits the use of the word COMPANY or CO. in the name of a non-profit corporation.

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 titleinformation. http://www.sunbiz.org/titledef.html.

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: 616A00005557

COVER LETTER

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

SUBJECT: Christ Way Dible Institute 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

\$87.50

Filing Fee

Filing Fee,

& Certified Copy

Certified Copy

& Certificate

ADDITIONAL COPY REQUIRED

FROM: Propose L. King

Name (Printed or typed

7819 N 50th Street

Tampa F1 33067

(813) 695 - 3262 Daytime Telephone number

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

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

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

| The name of the corporation shall be: Christ Way bible Institute Inc. | | | | | |
|--|---|--|--|--|--|
| ARTICLE II | PRINCIPAL OFFICE | 7 | | | |
| | Principal street address: | Mailing address, if different is: | | | |
| 3 | 819 N 50th Street | 10513 Goldwater LN | 7 | | |
| 1 | ompa FL, 33617 | RIVENIEW FI, 33678 | | | |
| | I PURPOSE for which the corporation is organized is: | | | | |
| TO - | TO Train and Educate Christian Workers for Ministry. | | | | |
| | | | | | |
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| ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected and appointed: | | | | | |
| Droct | ors are Appointed by C | ED Or Christ Way Church | | | |
| ARTICLE V | INITIAL OFFICERS AND/OR DIRECTORS | | | | |
| Name and Title: Roonle L King (P) Name and Title: | | | | | |
| Name and Ti | ele: Ronne L King (P) Name | ınd Title: | | | |
| Name and Ti Address | He: Pronte L King (P) Name: | | | | |
| |) | | | | |
| | 10518 GoldwaterLN Address | | | | |
| Address | 10518 Goldwater LN Address Riverview F1, 33678 | ss: | 01 | | |
| Address | 10518 Goldwater LN Address Riverview Fl. 33678 the: Chardou Lawrence (D) Hames | and Title: | JISIAIQ 33S | | |
| Address Name and Ti | 10518 Goldwater LN Address Riverview Fl. 33678 tle: Chardou Lawrence (D) Hame to 15417 Long Cypross Address | and Title: | JO NOISIAID JOSEPA J | | |
| Address Name and Ti | 10518 Goldwater LN Address Riverview F1, 33678 the: Chardou Lawrence (D) Hame to 15417 Long Cypress Address Dr. | and Title: SS: SS: SS: SS: SS: SS: SS: | SEGRETARY OF CONDITION OF CONDITION OF CONDITIONS | | |
| Address Name and Ti Address | 10518 Goldwater LN Address Riverview Fl. 33678 the: Chardou Lawrence (D) Hame to 15417 Larg Cypress Address Dr. Ruskin Fl. 33573 | and Title: 55 | DIVISION OF CORPUR DIVISION OF CORPUR DIVISION OF CORPUR | | |
| Address Name and Ti Address | 10518 Goldwater N. Address Riverview Fl. 33678 the Chardou Lawrence (D) hame a 15417 Long Cypress Address Dr. Riskin Fl. 33573 the Ophi Raglin (S) Name a | and Title: SS: SP PR ST PR | DIVISION OF CONTRACTOR OF STATE | | |
| Address Name and Ti Address | 10518 Goldwater LN Address Riverview Fl. 33678 the: Chardou Lawrence (D) Hame to 15417 Larg Cypress Address Dr. Ruskin Fl. 33573 | and Title: SS: SP PR ST PR | SEGRETARY OF STATE DIVISION OF CONFURATIONS | | |

| Name and Title:_ | | ne and Title: | |
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| Address | Ado | Iress: | |
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| _ | | | |
| Name and Title:_ | Nan Nan | ne and Title: | |
| Address | Add | ress: | |
| - | | **** | |
| _ | | | |
| | | | |
| | REGISTERED AGENT | | |
| The <u>name and Fl</u> | lorida street address (P.O. Box NOT acceptable | | |
| Name: | Maite Gittens | | |
| Address: | 7203 Five Point Cir | | |
| #207 Tampa F1 33634 | | | |
| ARMATELAL | NIGORDON INC. | | |
| | INCORPORATOR Idress of the Incorporator is: | | |
| Name: | Ronnie L. King | | |
| Address: | | | |
| | RIVERVIEW F1, 3357 | 8. | |
| | EFFECTIVE DATE: | | |
| | other than the date of filing:late is listed, the date must be specific and car | | |
| | inserted in this block does not meet the applical tive date on the Department of State's records. | ole statutory filing requirements, this date will not be listed as the | |
| | med as registered agent to accept service of pro familiar with and accept the appointment as regi | ocess for the above stated corporation at the place designated in this stered agent and agree to act in this capacity | |
| | Required Signature of Registered Agen | $\frac{4/3/20/6}{\text{Date}}$ | |
| 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 H/3/2016 Date | | | |
| , | | | |