N16000004535

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

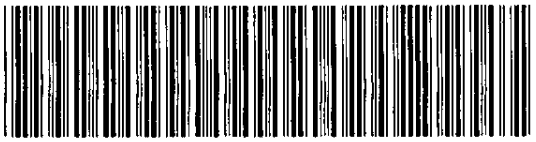
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100285292521

05/03/16--01035--014 **87.50

RECEIVED
16 MAY -3 PM 2:43
TO ACKNOWLEDGE
SUFFICIENCY OF FILING

APPROVED
AND
FILED
16 MAY -3 PM 3:06
SECRETARY OF STATE
TALLAHASSEE FLORIDA

TH
5-3-16

COVER LETTER

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

SUBJECT: Berasheet Word World Bible University, 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: Rev. Dr. Zellene Williams Smith
Name (Printed or typed)

3491 Torrington Way
Address

Tallahassee, FL 32317
City, State & Zip

850 878 2890
Daytime Telephone number

WordWorldbibleUniversity@gmail.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

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

ARTICLE I NAME

The name of the corporation shall be: Berasheet Word World Bible University, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal **street** address:

3491 Torrington Way
Tallahassee, Florida
32317

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To Teach Biblical Theology; To teach the Bible and Scriptures as the ordained and canonized Word of God; To teach old Testament Books of the Bible; TO teach New Testament Books of The Bible. To train and prepare students for ministry and Evangelism; To Prepare disciples for commissioning.

ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected and appointed: Elected and/or appointed by the president and Founder

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: President, Chancellor
Rev. Dr. Zellene Williams-Smith
Address
3491 Torrington Way
Tallahassee, FL 32317

Name and Title: Dewey Smith, III, Director
Address
2 Christopher Court
Duraham, NC
2770 4

Name and Title: Sterling B. Smith, Dir
Address
5035 S. Hampton Ridge Rd
Tallahassee, Florida
32311

Name and Title:
Address:

Name and Title: Phelemon T. Williams, Dir.
Address
3491 Torrington Way
Tallahassee, FL 32317

Name and Title:
Address:

FILED
16 MAY -3 PM 3:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED AND FILED

Name and Title: Dir. Sterling B. Smith, Jr. Name and Title: Victoria A. Smith, Dir.

Address: Dir. 3491 Torrington Way, Tallahassee, FL 32317 Address: 3491 Torrington Way, Tallahassee, FL 32317

Name and Title: Talitha Lopez, Dir. Name and Title: Halle C. Smith, Dir.

Address: 3491 Torrington Way, Tallahassee, FL 32317 Address: 3491 Torrington Way, Tallahassee, FL 32317

ARTICLE VI REGISTERED AGENT

The **name and Florida street address** (P.O. Box **NOT** acceptable) of the registered agent is:

Name: Dr. Zellene Williams Smith

Address: 3491 Torrington Way, Tallahassee, FL 32317

APPROVED AND FILED
16 MAY -3 PM 3:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE VII INCORPORATOR

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

Name: Dr. Zellene Williams Smith

Address: 3491 Torrington Way, Tallahassee, FL 32317

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

Zellene Williams Smith — Required Signature of Registered Agent — 5-3-2016 — 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.

Zellene Williams Smith — Required Signature of Incorporator — 5-3-2016 — Date