

N 16000004867

(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

le 24-



200284211372

04/08/16--01018--008 **78.75

FILED
16 MAY 16 PM 3:09
CLERK OF COURT
JULIA S. HARRIS

5/17/14

COVER LETTER

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

SUBJECT: Touching Lives Without Boundaries Ministries Corporation

(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: Vivian Johnson Mcknight

Name (Printed or typed)

806 St. Johns Ave.

Address

Palatka, FL 32177

City, State & Zip

386-325-8837

Daytime Telephone number

vivianmcknight@comcast.net

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

FILED
16 MAY 15 PM 3:09
TALLAHASSEE, FL
DIVISION OF CORPORATIONS

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



Original copy

FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 13, 2016

VIVIAN JOHNSON MCKNIGHT
806 ST. JOHNS AVENUE
PALATKA, FL 32177

SUBJECT: TOUCHING LIVES WITHOUT BOUNDARIES MINISTRIES
CORPORATION
Ref. Number: W16000027403

We have received your document for TOUCHING LIVES WITHOUT BOUNDARIES MINISTRIES CORPORATION and your check(s) totaling \$78.75. 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.

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.

Claretha Golden
Regulatory Specialist II
New Filing Section

Letter Number: 016A00007620

FILED
16 MAY 16 PM 3:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

ARTICLE I NAME

The name of the corporation shall be: Touching Lives Without Boundaries Ministries Corporation

FILED

ARTICLE II PRINCIPAL OFFICE

16 MAY 16 PM 3:09

Principal street address:
806 St. Johns Ave.

Palatka, Fl. 32177

Mailing address, if different is: SECRETARY OF STATE
P.O. BOX 518
TALLAHASSEE, FLORIDA

Palatka, FL 32177

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: See Attachment for

ARTICLE III

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

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Vivian J Mcknight (President)

Address: 720 North 11th St.
Palatka, FL 32177

Name and Title: Oliver Johnson (Trustee)

Address: 907 North 11th St.
Palatka, FL 32177

Name and Title: Robbie Charles (Trustee)

Address: 409 S 14th ST
Palatka, FL 32177

Name and Title: Malenda Sanders (Trustee)

Address: 1621 Clereland Ave
Palatka, FL 32177

Name and Title: Ona Baker (Trustee)

Address: 225 Benham ST
Palatka, FL 32177

Name and Title: Trustee: Steven Holmes

Address: 106 Belmont Drive
Palatka, FL 32177

Article III

Touching Live without Boundaries Ministries Corporation

To establish in the community and surrounding areas a place for the homeless, hungry, elderly, lost teens, battered woman etc. whomever needs assistance financially, physically and spiritually.

To compel the lost and restore the wounded to teach and educate those entering into leadership with the ministry and helping others to prepare them to function accordingly in the secular world.

This corporation is all about building, encouraging and strengthening people in all areas of life, to become more effectively and personally involved with their relationship with Jesus Christ.

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: Vivian Johnson

Address: 720 North 11 St
Palatka, FI 32177

ARTICLE VII INCORPORATOR

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

Name: Vivian Johnson

Address: 720 North 11th St
Palatka, FI 32177

ARTICLE VIII EFFECTIVE DATE: 4/4/2016

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

Vivian J. McKnight
Required Signature of Registered Agent

04/05/16
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.

Vivian J. McKnight
Required Signature of Incorporator

04/05/16
Date

FILED
16 MAY 16 PM 3:09
DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA