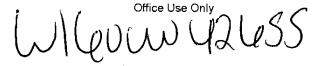
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(Re	questor's Name)				
(Address)					
(Ad	dress)	,			
(Cit	y/State/Zip/Phone	e #)			
PICK-UP	☐ WAIT	MAIL			
(Business Entity Name)					
(Document Number)					
Certified Copies	_ Certificates	of Status			
Special Instructions to Filing Officer:					
		:			



JUN 2 4 2016 T. SCOTT



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FLORIDA DEPARTMENT OF STATE Division of Corporations

June 10, 2016

MARTHA LEE 120 S.W. 6TH AVE HALLANDALE BEACH, FL 33009

SUBJECT: KINGDOM EAGLES PREPARATORY

Ref. Number: W16000042655

We have received your document for KINGDOM EAGLES PREPARATORY and your check(s) totaling \$87.50. 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.

A corporation may not serve as its own incorporator. Please designate the individual whose typed signature appears on the signature line.

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: 116A00012310

COVER LETTER

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

SUBJECT: Kingdom Eagles Preparatory School, Inc.

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: Martha Lee

120 5. W. 6th Ase

Hallandale Beh Florida 33009 City, State & Zip

954-647-7938 Daytime Telephone number

mcl othelordshouse.org
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	on shall be: Kingdom	Eag	gles Preparatory	iInc.	
	CIPAL OFFICE			,	
Principa	al street address:		Mailing address, if different is:		
610 5	T.W. 2 nd 5+		20 5. W 6 th Ave	 -	
Ha 11a-	idale Bol, Flor	ide 1	Iallandale Bel FL		
33600	<u> </u>		33009		
ARTICLE III PUR The purpose for which the	POSE e corporation is organized is:	e pu	rpose of this organ	ization	
			mmunity, We will en		
Children	from ages fou	-(4) +	o twelve (12). Studen	2+5	
will be in	tructed in ac	cordance	c to the rules set for	cth	
			county government. L		
teach m	oral values.a	~5 of	fer assistance to the	<u>entire</u>	
family.					
,		er in which the	directors are elected and appointed:	t = - 5	
are elected	and appointed e	very t	wo years.		
ARTICLE V INT	TIAL OFFICERS AND/OR DIRE	CTORS	Ŭ		
Name and Title: M	rtha Lee Director	Jame and Title:	: Clarence Gallagler, Tru	ustee	
			1053 Caroline Ave		
			Fr Landerdale, FL	5 2.	
330	Pu		33312		
Name and Title: Marrell Lee Assitant Name and Title: Sher: Powell Trusters Address 728 N. W. 11 St. Address: 628 N. W. 35 Ct					
Address 228	N. W. 11 5+.	Address:	628 N.W. 32 Ct		
Fort	Landerdale, FL		Hallandale BCL, FL	M - 32	
<u>333</u>	11		33009		
Name and Title: Retta Clarles, Trustee Name and Title: Joseph B. Lee Sr. Trustee					
Address 310	5.W. 29th Terr.	Address:	120 S.W. 6th A.c		
FT.	Landerdale, FL		Hallandele Bal FL		
.333	,		33009		

Name and Title:		Name and Title:		
Address				
	• •			
-				
Name and Title:		Name and Title:		
Address		Address:		
-				
-				
	REGISTERED AGENT			
The <u>name and I</u>	lorida street address (P.O. Box NOT a	. ,	is:	
Name:	Ma-tha Lee 120 S.W. GHAV			
Address:				
	Hallandale Bel	.,FL 33009		
	INCORPORATOR ddress of the Incorporator is:			
Name:	Marthe Lee			
Address:	120 5.W. 6th A			
	Hallendale Bel	K1 33009		
	EFFECTIVE DATE: Other than the date of filing:	(ODT	'IONAL)	
	late is listed, the date must be specific		e business days prior or 90 business days	
	e inserted in this block does not meet the ctive date on the Department of State's		irements, this date will not be listed as the	
	med as registered agent to accept serv familiar with and accept the appointme		ted corporation at the place designated in this to act in this capacity	
	Required Signature of Registe		5/20/16	
	Required Signature of Registe	ered Agent	' Date	
	ument and affirm that the facts stated in the of State constitutes a third degree felo		any false information submitted in a document F.S.	
2-	Required Signature of Ir		5 /2 0/16	
	Required Signature of Ir	ncorporator	Date	

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