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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

05/01/17

COVER LETTER

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

SUBJECT: Daily Encounter Global Ministry 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: Pascale Severe
Name (Printed or typed)

10326 Dylan Street # 724
Address

Orlando FL 32825
City, State & Zip

407-627-2583
Daytime Telephone number

pjsdesign2013@yahoo.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: DAILY ENCOUNTER GLOBAL MINISTRY INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address:

Mailing address, if different is:

2206 SAW PALMETTO LANE.
APT #103. ORLANDO FL 32828.

P.O. Box 781315
Orlando, FL 32828

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: to provide services for
spiritual well being, and a better humanitarian
environment for the people in this state and
beyond. Thus; through community ministry
outreach, counseling services, media ministry,
charitable missions and much more.

ARTICLE IV MANNER OF ELECTION

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

Elected at the annual meeting.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: ARNOLD NA. ARYEE DIR. Name and Title: DEBORAH D. DE-ARYEE DIR.

Address: 2206 SAW PALMETTO LANE. Address: 2206 SAW PALMETTO LANE.

APT #103

APT #103

ORLANDO FL 32828

ORLANDO FL, 32828

Name and Title: Pascale Severe Dir. & Adm Name and Title: _____

Address: 10326 Dylan Street' Address: _____

724

Orlando FL 32825

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

17 APR 28 PM 12:58

FILED

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: DEBORAH D. DEL-ARYEE

Address: 2206 SAW PALMETTO LANE. APT#103.
ORLANDO FL, 32828

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TALLAHASSEE, FLORIDA

ARTICLE VII INCORPORATOR

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

Name: Pascale Severe

Address: 10326 Dylan Street #724
Orlando, FL. 32825

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 days prior or 90 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

deborah D. Del-Aryee

Required Signature of Registered Agent

4/20/17

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.

Pascale Severe

Required Signature of Incorporator

4/20/2017

Date