

N17000008230

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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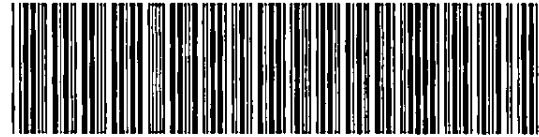
(Business Entity Name)

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08/10/17

COVER LETTER

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

SUBJECT: TRUE LOVE PROPHECY INTERNATIONAL MINISTRIES, 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: DOROTHY E ALEXANDER
Name (Printed or typed)

1705 GROVE STREET
Address

MAITLAND FLORIDA 32751
City, State & Zip

407-538-6036
Daytime Telephone number

HCTM3@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: TRUE LOVE PROPHECY INTERNATIONAL MINISTRIES INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address:

1705 GROVE STREET

MAITLAND, FLORIDA 32751

Mailing address, if different is:

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ARTICLE III PURPOSE

The purpose for which the corporation is organized is: FOR RELIGIOUS PURPOSES, SERVICES & FUNCTIONS, TO AIDE HIS OWN COMMUNITY NUTRITION.

ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected and appointed: By
HERITHA AND HERBERT

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:	<u>DOROTHY E. ALEXANDER (CEO)</u>	Name and Title:	<u>CORNELL R. ALEXANDER (T)</u>
Address:	<u>1705 GROVE STREET</u> <u>MAITLAND, FLORIDA 32751</u>	Address:	<u>1705 GROVE STREET</u> <u>MAITLAND FL 32751</u>

Name and Title:	<u>SHERITA D. MUJICA (A)</u>	Name and Title:	<u>HERITHA CONDEMARIN (T)</u>
Address:	<u>609 ORANGE TREE CRT</u> <u>MAITLAND FL 32751</u>	Address:	<u>435 FOREST LAKE DR</u> <u>ALAMONTE SPRINGS 320104</u>

Name and Title:	<u>DARLENE L. POUTURE (T)</u>	Name and Title:	
Address:	<u>6651 VILLAGE CIR</u> <u>ORLANDO, FL 32822</u>	Address:	

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: DOROTHY E ALEXANDER

Address: 1705 GROVE STREET
MAITLAND, FLORIDA 32751

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STATE
FLORIDA

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: DOROTHY E ALEXANDER

Address: 1705 GROVE STREET
MAITLAND FL 32751

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: N/A (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

Dorothy E Alexander
Required Signature of Registered Agent

Aug 13 2017
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.

Dorothy E Alexander
Required Signature of Incorporator

Aug 13 2017
Date