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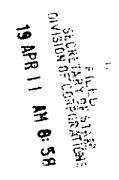
(Requestor's Name)
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PICK-UP WAIT MAIL
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(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
Percustomer would like

to change the name to Keep original file date. 5/9/19. - JD

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COVER LETTER

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

SUBJECT:	Anointed Word of Deliverance Ministries. I	nc
	(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)	า

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: Rasol Kamma
Name (Printed or typed)

9712 Spottswood Rd.W.

Jacksonville FL 32208 City, State & Zip

904.887.8770 Daytime Telephone number

rkamma 700 amail. 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: Anoin ted W	lord of Deliverance
ARTICLE II PRINCIPAL OFFICE (Charch	Ministry. Inc.
Principal <u>street</u> address: 9712 Spottswood Rd. W	Mailing address, if different is:
Jacksonville, FL 32208	R Contraction of the contraction
ARTICLE III PURPOSE The purpose for which the corporation is organized is: fee the	promotion of Faith based principles
as outlined in the Bible. To evan	garize the lost as it pertains
to faith and empowerment. To pre	wide education and livence and
ordain qualified individuals in s	pirital matters. To spread the
Gospel of Christ and empower to	the area importeristed, and
uneducated, and oppressed, and	dysfunctionalities in to be
delivered to a life of suci	al betterment.
ARTICLE IV MANNER OF ELECTION The manner in which the Pastor.	e directors are elected and appointed: Appointment by
PASTOR	
Name and Title: Rascol Kamma, Jr. Name and	Title: Gloria P. Kamma
Address 4670 Glendas Mendau Dr. Address:	
Jacksonville, FC 32208	Jacksonville, FL 32208
PRESIDENT	Bound Member
Name and Title: Jessie M. Kamma Name and	Title: Rubin Kamma
Jacksonville, EL 32208	Jacksonville, FL 32221
Board Chair	Board Member
Name and Title: Andre J. Cannon Name and	Title:
Address 5108 Abel Ln Address:	
Jacksonville, FL 32254	
Board Menber	

Name and Title:	Name and Title:	
Address	Address:	
Name and Title:	Name and Title:	
		S St.
Address		STATION SOLUTION
ARTICLE VI REGISTERED AGENT The name and Florida street address (P.	O. Box NOT acceptable) of the registered agent is:	
Name: Rasool	Kamma Jr.	
Address: 9712 Spo	Hswood Rd. W 1111, FL 32208	
ARTICLE VII INCORPORATOR The name and address of the Incorporator		
Name: Rasool	Kamma, Jr.	
Address: 9712 Sp.	Kamma, Jr. oHswood Rd.W. Me, FL 32208	
ARTICLE VIII EFFECTIVE DATE: Effective date, if other than the date of file (If an effective date is listed, the date m	ing: (OPTION ust be specific and cannot be more than five da	
Note: If the date inserted in this block do document's effective date on the Departm	es not meet the applicable statutory filing requirer ent of State's records.	ments, this date will not be listed as the
certificate, I am familiar with and accept	to accept service of process for the above stated the appointment as registered agent and agree to the appointment agree agree to the appointment agree agre	act in this capacity
Sasor Chame Required Signa	ware of Registered Agent RASOL KAMMA, JR Sefacts stated herein are true. I am aware that any	3/7/2019 Date
I submit this document and affirm that the to the Department of State constitutes a th	e facts stated herein are true. I am aware that any i <u>rd</u> degree felony as provided for in s.817.155, F.S	y false information submitted in a document S.
Q = C C C	5	3/7/2019 Date
	PASOCL KAMMA, JA.	