

7190000 12548

(Requestor's Name)

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PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

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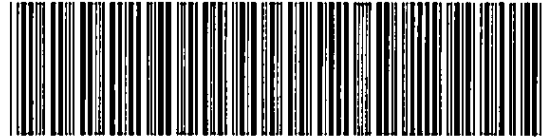
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W1900043536

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T. SCOTT



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FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 2, 2019

OLLIE ANUM
P.O. BOX 4002
BRANDON, FL 33509

SUBJECT: BEN V HEALTH MINISTRY CENTER & RESEARCH, INC
Ref. Number: W19000093536

We have received your document for BEN V HEALTH MINISTRY CENTER & RESEARCH, INC 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 document submitted does not meet legibility requirements for electronic filing. Please do not attempt to refax this document until the quality has been improved.

If your business entity does not intend to transact business until January 1st of the upcoming calendar year, you may wish to revise your document to include an effective date of January 1st. If you do not list an effective date of January 1st, your business entity will become effective this calendar year and it will be required to file an annual report and pay the required annual report fee for the upcoming calendar year this coming January, which is merely weeks away. By listing an effective date of January 1st, the entity's existence will not begin until January 1st of the upcoming year and will, therefore, postpone the entity's requirement to file an annual report and pay the required annual report filing fee until the following calendar year.

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.

Tyrone Scott
Regulatory Specialist II
New Filings Section

Letter Number: 219A00023790

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

ARTICLE I NAME

The name of the corporation shall be: BENV Health Ministry Center & Research, Inc

ARTICLE II PRINCIPAL OFFICE

Principal street address:

Mailing address, if different is:

8002 U.S HIGHWAY 301 SOUTH
RIVERVIEW, FL 33578

P. O. Box 4002
BRANDON, FL 33509

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: EXCLUSIVELY FOR CHARITABLE (E.G RELIEF OF THE POOR, THE DISTRESSED, FINANCIAL HARDSHIP), RELIGIOUS (JOHN WESLEY METHODISM), PATIENT ADVOCACY, EDUCATION SERVICES, AND MEDICAL RESEARCH N.E.C UNDER SECTION 501 (C) (3) OF INTERNAL REVENUE CODE OR CORRESPONDING SECTION OF FUTURE FEDERAL TAX CODE. DUE TO SHORTAGE OF HEALTHCARE PROFESSIONAL VOLUNTEERING SERVICE, HEALTHCARE PROFESSIONAL MINISTRY ASSOCIATION; A FAITH - BASED VOLUNTEERING SERVICE IS DESIGNED TO PROVIDE EDUCATION AND SERVE ALL FREE CLINICS AND COMMUNITY NEEDS AND MANAGED BY BENV HEALTH MINISTRY CENTER AND RESEARCH, INC., BOARD OF DIRECTORS/OFFICERS.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected and appointed: FOR THE FUTURE, AS STATED BY THE BYLAWS. ELECTED AT THE ANNUAL MEETING

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: RAMDS, ERIC (SECRETARY) Name and Title: _____

Address 1509 PINEY BRANCH CIRCLE Address: _____
VALRICO, FL 33594

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

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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: OLLIE ANUM
Address: 8002 U.S. HIGHWAY 301 SOUTH
RIVERVIEW, FL 33578

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: OLLIE ANUM
Address: P.O. BOX 4002
BRANDON, FL 33509

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: JANUARY 6, 2020. (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

On
Required Signature of Registered Agent

10/3/2019
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.

On
Required Signature of Incorporator

10/3/2019
Date