N33000014136

(Requestor's Name)
(Address)
(Address)
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(O), (O), (O)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer.
W23-125054

Office Use Only



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FLORIDA DEPARTMENT OF STATE Division of Corporations

November 8, 2023

REVEREND MICHAEL A LONGMIRE 335 W PEARSON ST HERNANDO, FL 34442 US

SUBJECT: THE LIFE DELIVERANCE MINISTRY IN CHRIST JESUS

Ref. Number: W23000125054

We have received your document for THE LIFE DELIVERANCE MINISTRY IN CHRIST JESUS and your check(s) totaling \$. However, the enclosed documenthas not been filed and is being returned for the following correction(s):

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

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.

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days for your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please-call (850) 245-6052.

Karen Lovelace Regulatory Specialist III

Letter Number: 923A00026006 49

www.sunbiz.org

Division of Cornerations - P.O. BOY 6327 Tallahaggae, Florida 32214

COVER LETTER

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

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 & Certified Copy Filing Fee, Certified Copy

& Certificate

ADDITIONAL COPY REQUIRED

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: The late Del	EVERONE Ministy InChrist Jasus Inc
ARTICLE II PRINCIPAL OFFICE	
Principal street address:	Mailing address, if different is:
Hernando Fl. 34442	
<u></u>	
ARTICLE III PURPOSE (Dosine in) The purpose for which the corporation is organized is:	his is a small own postit master Yest is
	Grade Children was true fuller Crystole. to 46-
	less the rencovary the dury and alamos
abuses for they rolonger lyee for	ith, Lucy De lige in Jesus. Through
·	- wage, a low assint on 42, willed
forces of Schow attention Had	3 Chiphen De will also preside a feed
and chapter hank som to	
	r in which the directors are elected and appointed:
Dearno Prad	
_	
ARTICLE V INITIAL OFFICERS AND/OR DIRECTO	<u>ORS</u>
Name and Title: His Physical A Leaven in 1950	Name and Title: Tho E. Christing CFC
Address 335 10 Demain Studies	Address: 375 CD Pacison Street
	Hernando CL 34442
Name and Title: DECHTO CO / NOTIONAL SECTIONAL AND A SECTIONAL	Name and Title:
Address 35(11) Decrypt Feet	Address:
Herrym Bo, Fl 301412	Address:
	Name and Title:
Name and Title:	Name and Title:
Address	Name and Title:

Name and Title:	Name and Title:			
Address	Address:			
				
Name and Title:	Name and Title:			
Address	Address:			
_				
ARTICLE IVE	COLORED ED ACENTO			
	EGISTERED AGENT rida street address (P.O. Box NOT acceptable) of the registered agent is:			
Name:	Hiristof A. Lagrine			
Address:	335 LO Prairies Street			
	Herrunda IL 34442			
		717		
	INCORPORATOR Iress of the Incorporator is:			
Name:	Michael A. Long m: re	38 E		
Address:	,			
	Herrinda FL 34442	55		
ARTICLE VIII	EFFECTIVE DATE:	٠ ا ا		
Effective date, if other than the date of 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				
- Pin Si	Required Signature of Registered Agent 8/8/23 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.				
Separate of	State constitutes a third degree felony as provided for in \$.817.155, F.S.			
40.00-7	Required Signature of Incorporator Date			