

N24000003385

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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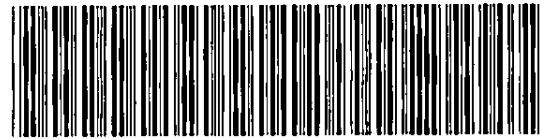
(Business Entity Name)

(Document Number)

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2024 MAR 14 PM 2:19

CLERK OF DISTRICT COURT
TALLAHASSEE, FL

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2024 MAR 14 PM 4:11

CLERK OF DISTRICT COURT
TALLAHASSEE, FL

MS

COVER LETTER

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

SUBJECT: FAITH AND FAVOR APOSTOLIC Church MINISTRIES I.N.C.
(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: APOSTEL JOHN MS BRIDE
Name (Printed or typed)

4025 SAINT PAUL DRIVE
Address

WINTER HAVEN FL 33880
City, State & Zip

863-662-8345
Daytime Telephone number

JOHN MS BRIDE 1760 ATG-MAIL.COM
E-mail address: (to be used for future annual report notification)

NOTE: Please provide the original and one copy of the articles.

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TALLAHASSEE, FL

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

ARTICLE I NAME

The name of the corporation shall be: FAITH AND FAVOR APOSTOLIC church MINISTRIES INC

ARTICLE II PRINCIPAL OFFICE

Principal street address:

Mailing address, if different is:

4025 SAINT PAUL DRIVE

WINTER HAVEN FL 33880

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Teaching And Feeding People
IN the MINISTRIES

ARTICLE IV MANNER OF ELECTION

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

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: PASTOR LILLY MC BRIDE Name and Title: _____

Address: 4025 SAINT PAUL DRIVE Address: _____
WINTER HAVEN FL
33880

Name and Title: APOSTLE JOHN MC BRIDE Name and Title: _____

Address: 4025 SAINT PAUL DRIVE Address: _____
WINTER HAVEN FL 33880

Name and Title: LUCY ANDERSON-CLARK Name and Title: _____

Address: 4025 SAINT PAUL DRIVE Address: _____
WINTER HAVEN FL 33880

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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: John Mc BRIDE

Address: 4025 SAINT PAUL DRIVE
WINTER HAVEN FL 33880

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name:

FAITH AND FAVOR APOSTOLIC Church MINISTRIES INC

Address:

4025 SAINT PAUL DRIVE
WINTER HAVEN FL 33880

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

John McBride

Required Signature of Registered Agent

03-14-24

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.

John McBride

Required Signature of Incorporator

03-14-24

Date

FILED
MAR 15 12:00 PM
CLERK OF COURT
STATE OF FLORIDA
HALL COUNTY