

N96000000131

## TRANSMITTAL LETTER

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

500001686125  
-01/11795--01013--016  
\*\*\*\*131.25 \*\*\*\*131.25

SUBJECT: House of Bread 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

☐ \$122.50  
Filing Fee  
& Certified Copy

☒ \$131.25  
Filing Fee,  
Certified Copy  
& Certificate

FROM: House of Bread Ministries Inc.  
Name (Printed or typed)

613 SE Tusawilla Ave.  
Address

Ocala, FL 34471  
City, State & Zip

(904) 867-7157  
Daytime Telephone number

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

B. REGISTER JAN 8 1996

FILED  
95 JAN -8 AM 8:07  
STATE  
TALLAHASSEE, FLORIDA

**ARTICLES OF INCORPORATION**

**FILED**  
96 JAN -8 AM 8:07  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*The undersigned, acting as incorporator(s) of a corporation pursuant to Chapter 517, Florida Statutes, adopt(s) the following Articles of Incorporation:*

**ARTICLE I**  
**Name**

The name of the corporation shall be:

*House of Bread Ministries Inc.*

**ARTICLE II**

**Principal place of business and mailing address**

The principal place of business and the mailing address of this corporation shall be:

*613 SE Tuscowilla Ave  
Ocala, Florida 34471*

**ARTICLE III**  
**Purpose(s)**

The specific purpose(s) for which the corporation is organized is (are):

*founding of new church for religious  
Education.*

**ARTICLE IV**

**Manner of election of directors**

The manner in which the directors are elected or appointed is as follows:

*Vote of the congregation as stated in the  
bylaws*

**Filing Fee: \$70.00**

ARTICLE V

Limitation of corporate powers

The corporate powers of this corporation are as provided in section 617.0302, Florida Statutes, unless limited as follows:

ARTICLE VI

Initial registered agent and street address

The name and the street address of the initial registered agent is:

Samuel A. Perkins  
613 SE Tusawilla Ave  
Ocala, Florida 34471

ARTICLE VII

Incorporators

See instructions for officers/directors

The name(s) and the street address(es) of the incorporator(s) for these articles of incorporation is(are):

Samuel A. Perkins  
613 SE Tusawilla Ave  
Ocala, Florida 34471

PD: Louise Perkins  
VPD: Jack Perkins  
SD: Shirley Wallace  
TD: Grace Panesso  
Address for all:

613 SE Tusawilla Ave  
Ocala, Florida 34471

The undersigned incorporator(s) has (have) executed these Articles of Incorporation this 4<sup>th</sup> day of January, 1996.

Signature(s) of Incorporator(s):

Samuel A. Perkins

Samuel A. Perkins  
Typed name of incorporator signing

\_\_\_\_\_

\_\_\_\_\_  
Typed name of incorporator signing

\_\_\_\_\_

\_\_\_\_\_  
Typed name of incorporator signing

NOTE: Affixing an officer title after a signature of an Incorporator does not constitute the designation of officers.

TO 81901A222580 9004

**CERTIFICATE OF DESIGNATION REGISTERED  
AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 OR 617.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is: House Of Bread Ministries Inc.  
(must include suffix)

2. The name and address of the registered agent and office is:

Samue A. Perkins  
(Name)

613 SE Tuscaawilla Ave.  
(Street address P. O. Box or Mail Drop Box NOT acceptable)

Ocala, Florida 34471  
(City/State/Zip)

FILED  
96 JAN -8 PM 8:07  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Samuel A. Perkins  
(Signature)

1/4/96  
(Date)