N97000006417

TRANSMITTAL LETTER

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314 SECRETARY OF STATE STATE OF CORPORATIONS

97 NOV 12 AM II: 44

SUBJECT: _	(Proposed corporate name - must include suffix)	
	500002344495-	(

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

\$70.00 \$78.75

Filing Fee & Certificate

□\$122.50 □ \$131.25

Filing Fee Filing Fee,
& Certified Copy
& Certificate

ADDITIONAL COPY REQUIRED

FROM:

Name (Printed or typed)

955 Melson Avenue

Address

Jacksonville, FL 32205

City, State & Zip

(904) 388-8116

Daytime Telephone number

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

2P 11-14-97

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Not for Profit Corporation Act, hereby adopt(s) the following Articles of Incorporation:

ARTICLE I NAME

The name of the corporation shall be:

TRUE HOPE AND DELIVERANCE MINISTERIES INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be: Jacksonville, FL TRUE HOPE AND DELIVERANCE 5123 N. Pearl Street Jacksonville, FL 32208

ARTICLE III PURPOSE(S)

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

Religious

MANNER OF ELECTION OF DIRECTORS

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

..As stated in bylaws

ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are: Allen G. Givens, Jr. 955 Melson Avenue Jacksonville, FL 32205

ARTICLE VI INCORPORATOR

The <u>name and address</u> of the <u>Incorporator</u> to these Articles of Incorporation are:

Allen G. Givens, Jr.

955 Melson Avenue 32205

Jacksonville, FL

Signature/Incorporator

(An additional article must be added if an effective date is requested.)

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.

Signature/Registered Agent