

N99000002363

TRANSMITTAL LETTER

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

100002840801--0
-04/15/99--01104--001
*****78.75 *****78.75

SUBJECT: Miracle Deliverance Ministries,
(Proposed corporate name - must include suffix)
Inc

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: Lenora Lockhart
Name (Printed or typed)

5345 Coronet Drive
Address

JAX, FLA. 32205
City, State & Zip

(904) 374-2498
Daytime Telephone number

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

99 APR 15 PM 2:31

FILED

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

gjc
4/15

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:

Miracle Deliverance Ministries, Inc.

ARTICLE II PRINCIPAL OFFICE

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

4721 San Juan
JAX, FLA.

ARTICLE III PURPOSE(S)

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

Church or Religious

ARTICLE IV MANNER OF ELECTION OF DIRECTORS

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

Done Annually for Election of Directors

ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

MARY L. EDMONDSON
4721 San Juan
JAX, FLA.

ARTICLE VI INCORPORATOR

The name and address of the Incorporator to these Articles of Incorporation are:

Lenora Lockhart
3345 Coronet Drive
JAX, FLA.

Lenora Lockhart

Signature/Incorporator

4-15-99

Date

(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.

Mary L. Edmondson

Signature/Registered Agent

April 15, 1999

Date

FILED
99 APR 15 PM 2:32
SECRETARY OF STATE
TALLAHASSEE, FLORIDA