4900000461

TRANSMITTAL LETTER

99 JUL 29 AM 11: 24 SECRETARY OF STATE TALLAHASSEE, FLORIDA

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

\$78.75

Filing Fee

Filing Fee &

Certificate of

Status

\$78.75

**\$87.50** 

Filing Fee

Filing Fee,

& Certified Copy

Certified Copy

& Certificate

ADDITIONAL COPY REQUIRED

Name (Printed or typed)

GAVE

TON BY PHONE TO

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

## 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:

FILED
99 JUL 29 AM II: 25
SECRETARY OF STATE
LALLAHASSEE, FLORIDA

The name of the corporation shall be: Holy Church Ministries

ARTICLE II PRINCIPAL OFFICE

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

630 Sharar Ave OBLocks Fl. 33054

ARTICLE III PURPOSE(S)

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

Prayers, Evangelisation

ARTICLE IV MANNER OF ELECTION OF DIRECTORS

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

Appointed by the Postor- as Stated in the By-Noise

ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Clovis Elie, 14130 NW5 Are Miami Fl. 33168

ARTICLE VI INCORPORATOR

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

Pierre Abel Davilmor 14130 NW 5th AVE Manis, 76 33168

Signature/Incorporator

17-26-99

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.

Signature/Registered Agent

07-26-99

Date

ARTICLE Officer/Director Corporate detail Title: President Name: Pierre Abel Davilmar
Address: 2211 Rodman Street Hollywood, Fl. 33020 Title: Secretary Name Abner Mentor Address: 929 NW 1445 Miami F/ 33168 Title: Deaconess Name Ariane Martin Address: 1590 NE 124 Street Miami Fl. 33161 Title: Deacon Name Gérard Suprême Address: 530 NW 112 Street Hiami Fl. 33/50 Tifle: Deaconess · Name: Marje Maurice Address: 1099 NW 102 Street Miami Fl. 33/50 Clouis Elie Address: 14130 NWSth Ave. Miami, FL 33/68 Title: Treasurer Holy Church Ministries Inc. Mailling Address: P.O. Box 680698
Miami Fl. 33168

TELEPHONE: 801-426-4100 EA1. 2222