P1300039223

(Requestor's Name)				
(Address)				
(Address)				
(Cit	y/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Bu	siness Entity Nar	me)		
(Do	cument Number)			
Certified Copies	_ Certificates	s of Status		
		· 1		
Special Instructions to	Filing Officer:			

Office Use Only



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FILLED

13 APR 30 PH 4: 25

SEONE AS A SECOND

T. Burch MAY ___1 2013.

COVER LETTER

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

SUBJECT: Generation Y Evangelistic Association I NC.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

SODJECT:	(BDODOSED CORDOD	TE NAME – MUST INCL	The CHEETY
	(PROPOSED CORPORA	TE NAME - MUST INCL	UDE SUFFIX)
Enclosed are an orig	ginal and one (1) copy of the ar	ticles of incorporation and	a check for:
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED
FROM: P	aul Tripp	e (Printed or typed)	
1	04 Bay Meadow	_	
		Address	
L	ynn Haven FL 32		
	City	, State & Zip	
8	50-628-9238		
	Daytime '	Telephone number	
so	ongsfromthethrone@	(Dyahoo.com	
	E-mail address: (to be use	ed for future annual report	notification)

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



RECEIVED

13 APR 30 PH 1: 92

INVISION OF CORE CRAFTONS

April 16, 2013

PAUL TRIPP 104 BAY MEADOWS DR LYNN HAVEN, FL 32444

SUBJECT: GENERATION Y EVANGELISTIC ASSOCATION INC.

Ref. Number: W13000022164

We have received your document for GENERATION Y EVANGELISTIC ASSOCATION INC and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Tim Burch Regulatory Specialist II New Filing Section

Letter Number: 013A00009055

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

	NCIPAL OFFICE Principal street address OW Dr		Mailing address, if di Betty LN	ifferent is:
Lynn Haven F	L 32444	Pana	ma City FL	
	POSE ne corporation is organized is: To district Son and online.	ibute and	sell our cds,	books, and
				13 APR 30
				-ED
	TAL OFFICERS AND/OR DIRECTOR President- Paul Tripp 104 Bay Meadow Dr	s <u>s</u>	Director- Jor 1468 Betty	
	Lynn Haven FL 32444	_	T anama On	ty FL 32444
Name and Title: Address	VP- Charles Dozier	Name and Title Address:	:	ty FL 32444

Name a	and Title:	Name and Title:
Addres	ss	Address:
ARTICLE VI	REGISTERED AGENT	
The <u>name and l</u>	Florida street address (P.O. Box NOT acceptable)	of the registered agent is:
Name:	Paul Tripp	<u></u>
Address:	104 Bay Meadow Dr	三 三
	Lynn Haven FL	
<u>ARTICLE VII</u>	INCORPORATOR	RILED
The name and a	address of the Incorporator is:	<u> </u>
Name:	Jonathan Garza	
Address:	1468 Betty LN	
	Panama City FI 3241	<u> </u>
	amed as registered agent to accept service of proc I am familiar with and accept the appointment as	
	at the	04/09/13
1	Required Signature/Registered Agent	Date
	ocument and affirm that the facts stated herein a Department of State constitutes a third degree fel	re true. I am aware that the false information submitted in a long as provided for in s.817.155, F.S.
	Mille L. Davill	- 04/09/13
	Required Signature/Incorporator	Date