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(Requestor's Name)		
(Address)		
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PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer		
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09/22/17--01008--012 **78.75



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COVER LETTER

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

SUBJECT: LOVEncounters International Ministeries, Inc.				
□ \$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status	
		ADDITIONAL CO	OPY REQUIRED	
FROM:	Addie W. t.	(Printed or typed)		
	P.D. Box 13	9 6 Address		
	Quincy, J.	3235 State & Zip		
		elephone number		
	Addieholta	e amail, com	notification)	

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

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

ARTICLE I NAME The name of the corporation shall be: LOVEN COU	nters, International Ministeries, Inc.
ARTICLE II PRINCIPAL OFFICE Principal street address	Mailing address, if different is:
476 Shiloh Road Quincy, 71. 32351	P.O. Box 1396 Quincy, 71. 32351
ARTICLE III PURPOSE The purpose for which the corporation is organized is:	wing ministry
	等 22 21 21 21
	<u>් ලි</u> ගි
ARTICLE IV SHARES The number of shares of stock is:	
Name and Title: Charleston Hult, Ji	Presiname and Title: La Creasky Ruffin S
Address 476 Shiloh Rd Quincy 71.	Address: 760 Silver Chase Dr. R Charlaw, Oklahoma
3,351	
	Name and Title: Blvd. Address:
#1701, Part Orange, 7 32129	1a
Name and Title:	Name and Title:
Address	Address:

Name and Title:	Name and Title:
Address	Address:
ARTICLE VI REGISTERED AGENT	
The name and Florida street address (P.O. Box NO	of the registered agent is:
Name: Adda e Holt	 _
Address: 476 Shiloh Ro	oad =
Guncy, 71.	3,2,3,5 23
ARTICLE VII INCORPORATOR	FILED P22 TH
The <u>name and address</u> of the Incorporator is:	
Name: addie Ho	
Address: 4710 Shiloh	Read
Quincy, 7.	32351
	. (OPTIONAL) recific and cannot be more than five days prior or 90 days after the
Note: If the date inserted in this block does not med the document's effective date on the Department of	et the applicable statutory filing requirements, this date will not be listed as State's records.
	ervice of process for the above stated corporation at the place designated in pointment as registered agent and agree to act in this capacity
addie Helt	tered Agent 9/21/17
Required Signature/Regis	tered Agent / Date
I submit this document and affirm that the facts st document to the Department of State constitutes a th	ated herein are true. I am aware that the false information submitted in a aird degree felony as provided for in s.817.155, F.S.
Addie Helt Required Signature/Incorporator	9/21/17
Required Signature/Incorporator	/ / Date

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