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# **COVER LETTER**

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

UBJECT:	(PROPOSED CORPORA	TE NAME – MUST INCLU	DE SUFFIX)
nclosed is an original a	nd one (1) copy of the Art	icles of Incorporation and	a check for
_			
[]\$70.00	<b>□</b> \$78.75	☐\$78.75	☐ \$87.50
Filing Fee	Filing Fee & Certificate of	Filing Fee & Certified Copy	Filing Fee, Certified Copy
	Status	a common copy	& Certificate
*		ADDITIONAL COPY REQUIRED	
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	11/11/11/11	an Antai	
FROM:	HLUIN HEN	IRY HLLEN rinted or typed)	_

7181 152 153 ST

WELLBORN FLA. 32094 City, State & Zip

386-963-3941 Daytime Telephone number

E-mail address: (to be used for future annual report notification)

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

## ARTICLES OF INCORPORATION

In Compliance with Chapter 617, F.S., (Not for Profit)

<u>ARTICLE I NAME</u>
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The name of the corporation shall be:

UNION BAPTIST OF OBRIEN FLORIDA INC.

# ARTICLE II PRINCIPAL OFFICE

The principal <u>street</u> address and mailing address, if different is:

13474 73 RD OBRIEN FLORIDA 32071

# ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

FOR CHARFTABLE, RELIGION & EDUCATIONAL PURPOSES.

### ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:

BY MAJORITY VOTE AT AN ANNUAL BUISNESS HELD -IN SEPTEMBER OF EACH YEAR.

# ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS

List name(s), address(es) and specific title(s):

ALUIN H. ALLEN 7181 152 MST WELLBORN FLA. 32074 - PRESIDENT

NAARTY HUMPHRIES 7932 240TMSTREET O'BRIEN FLA. 32071 VICE-PRESIDENT

MARVIN HUMPHRIES 25892 77TM RD O'BRIEN FLA. 32071 DIRECTOR

CHARLES WOOD 10409 63 RD DR. LIVE OAT FLA. 32060 - DIRECTOR

### ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

The <u>name and Florida street address</u> (P.O. Box NOT acceptable) of the registered agent is:

ALVIN H. ALLEN 7181 152 NOST. WELLBORN FLA. 32094 PRESIDENT

### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

MARTY HUMPHRIES 7932 240 TT ST. OBRIEN FLA. 33071

******	************
Having been named as registered agent to accept service of process in this certificate, I am familiar with and accept the appointment of	is for the above stated corporation at the place designated is registered agent and agree to act in this capacity.
alvan H. allan	5-17-2010
Signature/Registered Agent	Date
Signature/Incorporator	5-17-10
Signature/Incorporator //	Date