

N19000009987

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

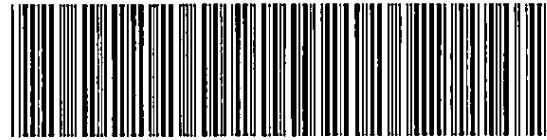
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
HARTFORD MASSACHUSETTS

COVER LETTER

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

SUBJECT: Saving Grace Faith based Inc.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

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: Dallas Leigh Eberhard
Name (Printed or typed)

1437 Lynn Lane
Address

Tallahassee, FL 32311
City, State & Zip

(850)364-0112 / (850)933-5610
Daytime telephone number

dallaseberhard168@gmail.com
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)

ARTICLE I NAME

The name of the corporation shall be: Saving Grace Faith Based, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address:

1437 Lynn Ln
Tallahassee, FL 32311

Mailing address, if different is:

Same

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Mind-body-soul-connect to whole self

purpose: Individual-family-community need

ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected and appointed:

appointed by president

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Dallas Eberhard Name and Title: _____

Address 1437 Lynn Lane Address: _____

Tallahassee, FL 32311

president

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

SECRETARY OF STATE
TALLAHASSEE, FL 32309

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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 NOT acceptable) of the registered agent is:

Name: Dallas Eberhard

Address: 1437 Lynn Lane

Tallahassee, FL 32311

ARTICLE VII INCORPORATOR

The name and address of the incorporator is:

Name: Dallas Eberhard

Address: 1437 Lynn Lane

Tallahassee, FL 32311

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Dallas Leigh Eberhard
Required Signature of Registered Agent

09/20/2019
Date

I submit this document and affirm that the facts stated herein are true, I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Dallas Leigh Eberhard
Required Signature of Incorporator

09/20/2019
Date