

N00000004083

TRANSMITTAL LETTER

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

00 JUN 21 PM 12:25

APPROVED
AND
FILED

SUBJECT: The Butterfly Gang Puppet Ministry, Inc.
(Proposed corporate name - must include suffix)

300003299163-7
-06/21/00--01019--015
*****87.50 *****87.50

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: Connie Gibbs
Name (Printed or typed)

89 Emily Lane
Address

Crawfordville, FL 32327
City, State & Zip

(850) 421-7641
Daytime Telephone number

Will wait

RECEIVED
00 JUN 21 PM 12:21
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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

T. Burch JUN 21 2000

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:

ARTICLE I NAME

The name of the corporation shall be:

The Butterfly Gang Puppet Ministry, Inc

ARTICLE II PRINCIPAL OFFICE

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

89 Emily Lane
Crawfordville, FL 32327

ARTICLE III PURPOSE(S)

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

to propagate the gospel of Jesus Christ and for
the edification of Christian believers.

ARTICLE IV MANNER OF ELECTION OF DIRECTORS

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

Appointed by chair person as stated in by-laws.

ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Connie Gibbs
89 Emily Lane
Crawfordville, FL 32327

ARTICLE VI INCORPORATOR

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

Connie Gibbs
89 Emily Lane
Crawfordville, FL 32327

Signature/Incorporator

6/21/00
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.

Connie Gibbs

Signature/Registered Agent

6/21/00

Date

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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AND
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