TRANSMITTAL LETTER

N02000004546

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

600005693826--4
-06/06/02--01006--005
*****87.50 *****87.50

SUBJECT: ***TRINITARIAN HANDMAIDS OF THE DINE WORD***

(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: *SR. MA. PATRICIA TAPALES, THDW*

Name (Printed or typed)

905 W. Madison Street

Address

Starke, FL 32091

City, State & Zip

(904) 964 - 4546

Daytime Telephone number

FILED
02 JUN 13 AM 9:34
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

-002-162394 6/14/02

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

June 6, 2002

SR. MA. PATRICIA TAPALES, THDW
905 W. MADISON ST
STARK, FL 32091

SUBJECT: TRINITARIAN HANDMAIDS OF THE DIVINE WORD
Ref. Number: W02000016394

We have received your document for TRINITARIAN HANDMAIDS OF THE DIVINE WORD and your check(s) totaling $87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of the corporation must contain a corporate suffix. This suffix may be: CORPORATION, CORP., INCORPORATED, or INC. Sections 617.0401(1)(a) and 617.1506(1), Florida Statutes, prohibits the use of the word COMPANY or CO. in the name of a non-profit corporation.

Please return the 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) 245-6930.

Donna Graves
Document Specialist
New Filing Section

Letter Number: 302A00037216

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

FILED
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME
The name of the corporation shall be:

TRINITARIAN HANDMAIDS OF THE DIVINE WORD, INC.

ARTICLE II PRINCIPAL OFFICE
The principal place of business and mailing address of the corporation shall be:

905 W. Madison Street
Starke, FL 32091

ARTICLE III PURPOSE
The purpose for which the corporation is organized is:

To spread the Good News of the Holy Trinity
and to help uplift the condition of the poor.

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

Appointed by the Founder

ARTICLE V INITIAL DIRECTORS/OFFICERS
The name(s), address(es) and titles:

President:	***SR. MA. PATRICIA TAPALES, THDW***
Vice-Pres.:	***SR. MA. GRACELA OMAMALIN, THDW***
Secretary: / ***Treasurer:***	***SR. MA. JOVELYN ADCAN, THDW***

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS
The name and Florida street address of the registered agent is:

GLORIOSA R. ANTIPORDA, M.D.
905 W. Madison Street
Starke, FL 32091

ARTICLE VII INCORPORATOR
The name and address of the Incorporator is:

Sr. Ma. Patricia Tapales, THDW
SR. MA. PATRICIA TAPALES, THDW
905 W. Madison Street
Starke, FL 32091

****

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.

Signature/Registered Agent

6-03-02
Date

GLORIOSA R. ANTIPORDA, M.D.