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TRANSMITTAL LETTER

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

SUBJECT: Shelter From The Storm, Incorporated
(PROPOSED CORPORATE NAME-MUST INCLUDE SUFFIX)

Enclosed is an original a	nd one(1) copy of the arti	cles 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: Lyndon C. Edwards

Name (Printed or typed)

4306 NW 51st Dri Je

Address

Gainesville FL 32606

City, State & Zip

Davtime Telephone number

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: Shelter From the Storm, Incorporated.

ARTICLE II: PRINCIPAL OFFICE

The principal place of business of this corporation shall be:

422 NW 15th Avenue Gainesville, Florida 32601-4209

The mailing address of this corporation shall be:

Post Office Box 1144 Gainesville, FL 32601-1144

ARTICLE III: PURPOSE

The purpose for which the corporation is organized is: To provide a structured living environment for recently released male ex-offenders.

ARTICLE IV: MANNER OF ELECTION

The manner in which the directors are elected or appointed: The directors have been appointed by the membership of the Bethel Seventh-day Adventist Church of Gainesville, FL in official business session. Directors will serve a two-year renewable term.

ARTICLE V: INITIAL DIRECTORS AND/OR OFFICERS

Dr. Delores C.S. James, PhD, RD, LD/N, FASHAChairperson
3928 N.W. 59th Avenue
Gainesville, FL 32653

Lyndon C. Edwards, Sr., MBA, MHS Treasurer 4306 Northwest 43rd Street Gainesville, FL 32606 1001 APR -5 P 2:

Pastor Eddie G. Hall, Jr., BS, Management P.O. Box 1365 Hawthorne, FI 32640

ARTICLE VI: INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the registered agent is:

Lyndon C. Edwards, Sr. 4306 NW 51st Drive Gainesville, FL 32606-4321

ARTICLE VII: INCORPORATOR

The name and address of the Incorporator is:

Dr. Delores C. S. James 3928 N.W. 59th Avenue Gainesville, FL 32653

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

Date

Signature/Incorporator

Date