

N04000006540

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☒ WAIT

☐ MAIL

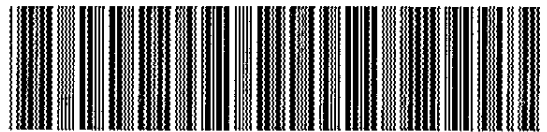
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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07/02/04 --01033--002 **70.00

RECEIVED
04 JUL -2 AM 11:07
STATE
DEPARTMENT OF REVENUE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FILED
04 JUL -2 AM 11:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

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

SUBJECT:

Smith Temple
First Born [REDACTED] Revival Center
(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:

Bishop - Rozell Davis
Name (Printed or typed)

POX 918 Woodville Fla
Address

Woodville Fla 32312
City, State & Zip

850-421-1481
Daytime 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:

Smith Temple Revival Center
First Born Inc.

ARTICLE II PRINCIPAL OFFICE

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

P.O. Box 918 Woodville Fla. 32362

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To Save Souls, Heal pray for the Sick Help the poor
& needy work with young people

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:

Bishop Rozell Davis

Pastor

ARTICLE V INITIAL DIRECTORS/OFFICERS

The name(s), address(es), and title(s):

Rozell Davis Bishop + Pastor

Lillie Bell Davis acc Pastor

Mattie Bee Roberts Pastor aid - Lola Johnson State Mother

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Lillie Bell Davis 9424 Heron St Tallahassee Fla 32305
my mailing address P.O. Box 918 Woodville Fla 32362

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Bishop Rozell Davis
P.O. Box 918 Woodville Fla 32362

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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.

Lillie Bell Davis

Signature/Registered Agent

7/3/04
Date

Rozell Davis

Signature/Incorporator

7/3/04
Date