

No 5800004701

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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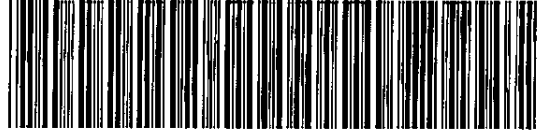
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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**TRANSMITTAL LETTER**

Department of State  
Division of Corporation  
P.O. Box 6327  
Tallahassee, Florida 32314

**SUBJECT:** Providence at West Jacksonville, Inc.

Enclosed is an original and one(1) copy of the Articles of Incorporation and a check for:

\$87.50 - Filing Fee, Certified Copy & Certificate of Status

**FROM:** Sharlene E. Martin  
12315 Bucks Harbor Drive, S  
Jacksonville, Florida 32225  
Daytime Phone # (904) 221-3969

**ARTICLES OF INCORPORATION**  
In Compliance with Chapter 617, F.S., (Not for Profit)

**Article I - Name**

The name of the corporation shall is: Providence at West Jacksonville, Inc.

**Article II - Principal Office**

The street address of the principal office is: 2700 University Blvd, S, Jacksonville, Florida, 32216. The mailing address is: 8179 Galaxie Dr., Jacksonville, Florida, 32244.

**Article III - Purpose**

The corporation is organized to operate exclusively for religious, charitable, and educational purposes including, for such purposes, the making of distributions to organizations that qualify as exempt organizations under as described in Section 501 (C)(3) of the Internal Revenue Code, or the corresponding section of any future federal tax code.

**Article IV - Manner of Election**

The secular affairs of the corporation shall be managed by a Board of Trustees, who shall be elected by the membership of the church in accordance to the By-Laws adopted by the church membership.

**Article V - Initial Directors and/or Officers**

Dr. Timothy B. Hicks, Sr. 8179 Galaxie Dr. Jacksonville, Fl., 32244	Pastor
Jerry Martin 12315 Bucks Harbor Dr. S Jacksonville, Fl. 32225	Chairman, Board of Deacons
Sharlene Martin 12315 Bucks Harbor Dr. S Jacksonville, Fl. 32225	Church Administrator
Veronica Troup 3029 Lagney Dr. Jacksonville, Fl. 32208	Minister of Christian Education

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**Article VI - Initial Registered Agent and Street Address**

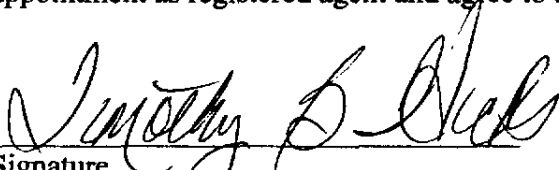
Dr. Timothy B. Hicks, Sr.                      Registered Agent  
8179 Galaxie Dr.  
Jacksonville, Florida 32244

**Article VII - Incorporator**

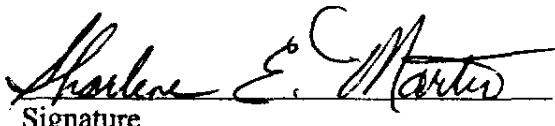
Sharlene E. Martin                              Incorporator  
12315 Bucks Harbor Dr. S  
Jacksonville, Florida 32225

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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.

  
\_\_\_\_\_  
Signature  
Timothy B. Hicks, Sr., Registered

\_\_\_\_\_  
Date      4/29/05

  
\_\_\_\_\_  
Signature  
Sharlene E. Martin, Incorporator

\_\_\_\_\_  
Date      5/2/05