

N05000009940

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

(Business Entity Name)

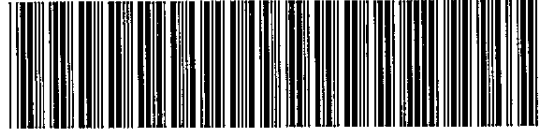
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05 SEP 27 PM 1:39

STATE OF FLORIDA  
TALLAHASSEE, FLORIDA

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STATE OF FLORIDA  
TALLAHASSEE, FLORIDA

COVER LETTER

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05 SEP 27 PM 1:39

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

SUBJECT: Community Parish Nursing, Inc.  
(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: Ruth Beck  
Name (Printed or typed)

1342 Vickers Rd  
Address

Tallahassee FL 32303  
City, State & Zip

850-562-3097  
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**

Name of the corporation shall be:

Community Parish Nursing, Inc.

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE II PRINCIPAL OFFICE**

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

1342 Vickers Rd  
Tallahassee, Fl. 32303

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

To be a support network for the recruitment and training of Parish Nurses. To assist in the development of Parish Nurses in individual churches and faith communities. To promote health

**ARTICLE IV MANNER OF ELECTION**

The manner in which the directors are elected or appointed:

ministries and programs in the area of Health, Healing and Wholeness in the wider social community  
will be stated in by-laws

**ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS**

List name(s), address(es) and specific title(s):

Ruth Beck  
1914 Myrick Rd  
Tallahassee, Fl. 32303

Lois Harg  
5383 Redington Dr  
Tallahassee, Fl.

**ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Ruth Beck  
1914 Myrick Rd  
Tallahassee, Fl. 32303

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Ruth Beck  
1914 Myrick Rd  
Tallahassee, Fl. 32303

\*\*\*\*\*  
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.

Ruth Beck  
Signature/Registered Agent

9.27.05  
Date

Ruth Beck  
Signature/Incorporator

9.27.05  
Date