

N0600000922

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

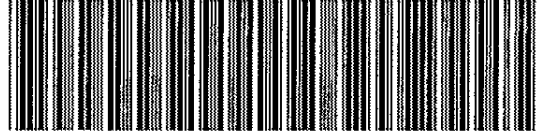
(Business Entity Name)

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
06 SEP 20 PM 3:52

W06-40296

## COVER LETTER

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

SUBJECT: WOMEN PASTORS' Christian Fellowship 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: Leola Payne  
Name (Printed or typed)

2205 S.W. 48th Ave  
Address

West Park, FL 33023  
City, State & Zip

954-319-4282 - 954-963-2813  
Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

September 13, 2006

LEOLA PAYNE  
2205 S.W. 48TH AVENUE  
WEST PARK, FL 33023

SUBJECT: WOMEN PASTORS' CHRISTIAN FELLOWSHIP, INC.  
Ref. Number: W06000040296

We have received your document for WOMEN PASTORS' CHRISTIAN FELLOWSHIP, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please complete Articles I-VII.

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) 245-6962.

Valerie Herring  
Document Specialist  
New Filing Section

Letter Number: 206A00055221

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

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DIVISION OF CORPORATIONS

06 SEP 20 PM 3:52

**ARTICLE I NAME**

The name of the corporation shall be:

*WOMEN PASTORS' Christian Fellowship INC.*

**ARTICLE II PRINCIPAL OFFICE**

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

*THE Church of Christ of Deliverance, INC  
4215 S.W. 19th ST  
WEST PARK, FL. 33023*

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

*TO unite women Pastors to Fellowship together in the unity of the faith,  
TO build structural pastoral leadership skills, to enhance the total woman, to  
strengthen their posture, and to equip her for service.*

**ARTICLE IV MANNER OF ELECTION**

The manner in which the directors are elected or appointed:

*Each member shall be elected or appointed by two thirds votes of the board  
members. The tenure of each board member is for a period of two years or longer  
if voted back into office.*

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

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

*Leola Payne - President  
2205 S.W. 48th Ave  
WEST PARK, FL. 33023*

*Evelyn Bartley - Vice Pres.  
225 N.W. 30th Ave  
FT. LAUDERDALE, FL. 33311*

*Evelena S. Hodge - Treasurer  
1521 N.W. 17th St  
FT. LAUDERDALE, FL. 33311*

*Ruby Franklin, Secy.  
1691 S. 59th Ave.  
Hollywood, FL. 33023*

*Roberta Reynolds - Chaplin  
3277 N.W. 13th St  
FT. LAUDERDALE, FL. 33311*

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

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

*Leola Payne  
2205 S.W. 48th Ave  
WEST PARK, FL. 33023*

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

*LEOLA PAYNE  
2205 S.W. 48th Ave  
WEST PARK, FL. 33023*

\*\*\*\*\*

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.

*Leola Payne*  
\_\_\_\_\_  
Signature/Registered Agent

*LEOLA PAYNE*

*9/18/06*  
\_\_\_\_\_  
Date

*Leola Payne*  
\_\_\_\_\_  
Signature/Incorporator

*LEOLA PAYNE*

*9/18/06*  
\_\_\_\_\_  
Date