

N0700000 8545

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☒ WAIT

☐ MAIL

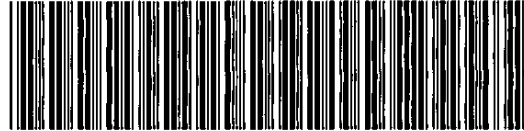
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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08/30/07--01026--017 **70.00

RECEIVED
07 AUG 30 PM 12:14
TALLAHASSEE, FLORIDA
DIVISION OF CORPORATIONS
STATE OF FLORIDA

FILED
07 AUG 30 PM 12:23
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

8/30/07

COVER LETTER

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

SUBJECT: Hews of Grace Ministries, 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: Kerry C. Nolen
Name (Printed or typed)

91 Summerwind Circle W.
Address

Crawfordville, FL 32327
City, State & Zip

(850) 746-3921
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: Heirs of Grace Ministries, Inc.

ARTICLE II PRINCIPAL OFFICE

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

91 Summerwind Circle W.
Crawfordville, FL 32327

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Gospel Music Ministry

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:

are appointed per Minutes of Meeting
held 8/11/07 (attached)

ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS

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

Kerry L. Nolen - President
Risa Powell - Vice President
Cindy D'Steer - Secretary / Treasurer

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Kerry L. Nolen
91 Summerwind Circle W.
Crawfordville, FL 32327

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Kerry L. Nolen
91 Summerwind Circle W., Crawfordville, FL
32327

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.

Kerry L. Nolen
Signature/Registered Agent

8/30/07
Date

Kerry L. Nolen
Signature/Incorporator

8/30/07
Date

FILED
07 AUG 30 PM 12:23
SECRETARY OF STATE
TALLAHASSEE, FLORIDA