

N07000010910

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP



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MAIL

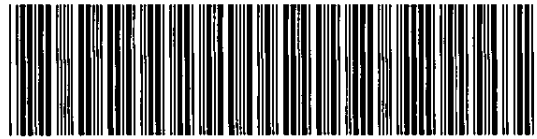
(Business Entity Name)

(Document Number)

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

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DEPT. OF REVENUE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

FILED

07 NOV - 9 AM 11:52

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## COVER LETTER

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

SUBJECT: HOLY SPIRIT CONNECTIONS 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:

EDNA HENSON  
Name (Printed or typed)

49 BENNETT RD  
Address

Chattahoochee, Florida 32324  
City, State & Zip

850-363-2228  
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:

HOLY SPIRIT CONNECTIONS MINISTRIES, INC.

**ARTICLE II PRINCIPAL OFFICE**

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

49 BENNETT RD.  
CHATTahooCHEE, FLORIDA 32324

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

MINISTER THE GOSPEL OF JESUS CHRIST TO THE:  
1 LOST 3 HUNGRY 5 DEPRESSED  
2 SICK 4 POOR USING MANY DIFFERENT AVENUES

**ARTICLE IV MANNER OF ELECTION**

The manner in which the directors are elected or appointed:

APPOINTED BY CEO

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

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

EDNA HENSON  
CHRISTOPHER WATHEN  
ANNETTE CARNES  
MICHAEL GURLES  
MARLENE BUZZELL

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

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

EDNA HENSON  
49 BENNETT RD.  
CHATTahooCHEE, FLORIDA 32324

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

EDNA HENSON  
49 BENNETT RD.  
CHATTahooCHEE, FLORIDA 32324

\*\*\*\*\*  
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/Registered Agent

Date

11-9-2007

Signature/Incorporator

Date

11-9-2007

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

07 NOV - 9 AM 11:53

FILED