# N0800009256

-	(Requestor's Name)				
, <b>-</b>	(Address)				
-					
(City/State/Zip/Phone #)					
	PICK-UP WAIT MAIL				
-	(Business Entity Name)				
(Document Number)					
C	Certified Copies Certificates of Status				
Special Instructions to Filing Officer:					

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RECEIVED
DEPARTMENT OF STATE
VISION OF CORPORATION

# COVER LETTER

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

SURJECT: New Hope	Baptist Church of Springhill, I	nc.		
	(PROPOSED CORPORAT	E NAME – <u>MÜST INCLU</u>	DE SUFFIX)	
Enclosed is an original	and one(1) copy of the Artic	les of Incorporation and a	check for:	
\$70.00 Filing Fee	\$78.75  Filing Fee &  Certificate of  Status	\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate	
FROM:	Paul A. Posey & Co., P.A. Name (Pr	inted or typed)	-	
2080 Delta Way Address				
Tallahassee, FL 32303 City, State & Zip				
(850) 386-4443  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:

New Hope Baptist Church of Springhill, Inc.

## ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is:

Street Address: 5875 New Hope Church Road Tallahassee, FL 32305

Mailing Address: 7037 Springhill Road Tallahassee, FL 32305

### ARTICLE III **PURPOSE**

The purpose for which the corporation is organized is:

Church - To bring people together to engage in religious worship.

# ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:

Directors shall be appointed by the Board Chairman.

# ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS

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

Board Chairman: Pastor, Danny Romans

Director: Quinton Vaughan Director: Robert Allen Treasurer: Tonia Meeks

# ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Paul A. Posey, CPA 2080 Delta Way Tallahassee, FL 32303

# ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Paul A. Posey, CPA 2080 Delta Way Tallahassee, FL 32303

Having been named as registered agent to necept 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

10-6-08

Signature/Incorporator