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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

EP 1/23/09

## COVER LETTER

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

**SUBJECT:** Upon The Rock Community Outreach Church 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: Ernestine nH Piper  
Name (Printed or typed)

1365 Haulover Ave  
Address

Spring Hill, FL 34608  
City, State & Zip

(352) 686 - 9843  
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:

Upon The Rock Community Outreach Church Ministries Inc.

**ARTICLE II PRINCIPAL OFFICE**

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

1365 Haulover Ave

P.O. Box 3841

Spring Hill, FL 34608

Spring Hill, FL 34611

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: Outreach ministries to single parent families and other needy children to assist with getting needed school supplies and other needs that arise, To glorify God by obeying the great commission.

**ARTICLE IV MANNER OF ELECTION**

The manner in which the directors are elected or appointed:

By nomination and majority vote in a business meeting.

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

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

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

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

Ernestine H Piper

1365 Haulover Ave Spring Hill, FL 34608

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

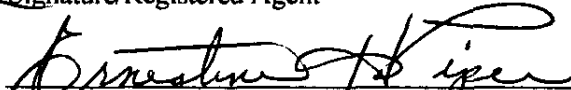
Ernestine H Piper

1365 Haulover Ave Spring Hill, FL 34608

\*\*\*\*\*  
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

1/17/09  
\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Signature/Incorporator

1/17/09  
\_\_\_\_\_  
Date

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