

**N09000005214**

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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2009 MAY 27 AM 11:55  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**J. Shivers MAY 28 2009**

W09-22405  
2554

## COVER LETTER

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

SUBJECT: Armor of Faith Christian Center, 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: Craig S. Campbell, Sr.  
Name (Printed or typed)

P. O. Box 77505  
Address

Jacksonville, Fl. 32226-77505  
City, State & Zip

(904) 699-4785 cell  
Daytime Telephone number

cmpblsr@aol.com  
E-mail address: (to be used for future annual report notification)

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**SECRETARY OF STATE**  
**TALLAHASSEE, FLORIDA**

**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:

Armor of Faith Christian Center, Inc.

**ARTICLE II PRINCIPAL OFFICE**

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

6118 Dawnridge Rd. S. Jax. Fl. 32277

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Worship

**ARTICLE IV MANNER OF ELECTION**

The manner in which the directors are elected or appointed:

By appointment

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

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

Pastor: Craig S. Campbell, Sr.

Decon: Willie Reed

Treasures: Darinelle Worlds, Kenyetta Reed

Secretary: Ebony West

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

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

Craig S. Campbell, Sr.

6118 Dawnridge Rd. S.

Jacksonville, Fl. 32277

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Craig S. Campbell, Sr.

P.O. Box 77505

Jacksonville, Fl. 32226-7505

\*\*\*\*\*

*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.*

Craig S. Campbell, Sr.  
Signature/Registered Agent

05-26-09

Date

Craig S. Campbell, Sr.  
Signature/Incorporator

05-26-09

Date

Craig S. Campbell, Sr.

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