N09000005892

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

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Special Instructions to Filing Officer:

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

W09-25970

B. McKnight JUN 16 2009

COVER LETTER

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

SUBJECT: Shared Abundance 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: Mary C. Orton
Name (Printed or typed)

12139 58th Place North
Address

WPB, Fl 33411
City, State & Zip

561-319-1300
Daytime Telephone number

wdmassey3rd@aol.com
E-mail address: (to be used for future annual report notification)

NOTE: Please provide the original and one copy of the articles.

RECEIVED
DEPARTMENT OF STATE
09 JUN 12 PM 2:20

FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 3, 2009

MARY C ORTON
12139 58TH PLACE NORTH
WPB, FL 33411

SUBJECT: SHARED ABUNDANCE MINISTRIES, INC.
Ref. Number: W09000025970

We have received your document for SHARED ABUNDANCE MINISTRIES, INC. and your check(s) totaling $78.25. However, the enclosed document has not been filed and is being returned for the following correction(s):

The Florida Statutes require an entity to designate a street address for its principal office address. A post office box is not acceptable for the principal office address. The entity may, however, designate a separate mailing address. The mailing address may be a post office box.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6931.

Becky McKnight
Regulatory Specialist II
New Filing Section

Letter Number: 309A00018673

ARTICLES OF INCORPORATION

In Compliance with Chapter 617, F.S., (Not for Profit)

FILED
09 JUN 12 PM 12:28
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

Shared Abundance Ministries, Inc

ARTICLE II PRINCIPAL OFFICE

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

12139 58th PLACE North
W.P.B. - FL. 33411

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Spread the gospel of Jesus Christ, by taking care of the homeless and hurting.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:

Must be of the Christian faith and appointed by the incorporator.

ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS

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

Mary C. Orton, 12139 58th Place North,WPB, Fl, 33411; Director and CFO
Joan M. Orton, 12139 58th Place North,WPB, Fl, 33411; Community Resource Coordinator
Warren D. Massey III, 15175 97th Rd North, WPB, Fl, 33412; Outreach Ministry Coordinator

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Mary C. Orton
12139 58th Place North
WPB, Fl, 33411

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Mary C. Orton
12139 58th Place North
WPB, Fl, 33411

****

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.

Mary C. Orton — Mary C. Orton
Signature/Registered Agent

5-19-09
Date

Mary C. Orton — Mary C. Orton
Signature/Incorporator

5-19-09
Date