

N09000006993

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

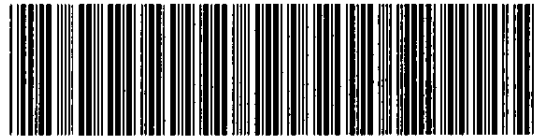
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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07/14/09--01043--017 **78.75

FILED
2009 JUL 16 AM 9:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. Shivers JUL 20 2009

July 9, 2009

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

RE: Jacksonville Outreach Ministries LLC

L09000046153

FROM LLC to NON PROFIT

Please note that I have attached the following documents

- A) documentation to confirm that the LLC is being dissolved
- B) Letter to release the name so that it can now be a non-profit
- ☒ C) Documentation to register as a nonprofit.

Please release the name as there are no intentions of reactivating it as an LLC.

Thank you so much.

Have a wonderful day.



Sylvie LaBerge
10101 Courtyard Place West
Jacksonville, Florida 32256
Cell: 904 307-8008
sylvie@jacksonvilleoutreach.org

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TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: Jacksonville Outreach 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: Sylvie LaBerge
Name (Printed or typed)

10101 Courtyard Place West
Address

Jacksonville, Florida 32256
City, State & Zip

(904) 307-8008
Daytime Telephone number

sylvie@jacksonvilleoutreach.org
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:

Jacksonville Outreach Ministries, Inc
10101 Courtyard Place Jacksonville, Florida 32256

ARTICLE II PRINCIPAL OFFICE

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

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Host religious conferences/meetings for churches, ministries and the public for the purpose of training and equipping the church to help people live better lives.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:

The Director has already appointed the co-director and assistant director based on past experience in working together and now the rest of the board through approvals etc. will be approved by the Director, Asst Director and Co-Director.

ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS

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

Sylvie LaBerge, Director 10101 Courtyard Place West Jacksonville FL 32256
Sonia Flowers, Co-Director 13050 Highland Glen Way Jacksonville, FL 32224
Douglas Snead, Assistant Director

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Sylvie LaBerge
10101 Courtyard Place West
Jacksonville, Florida 32256

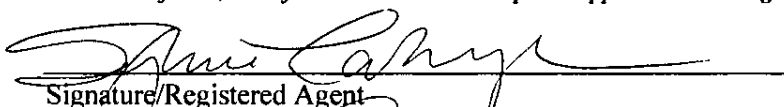
ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

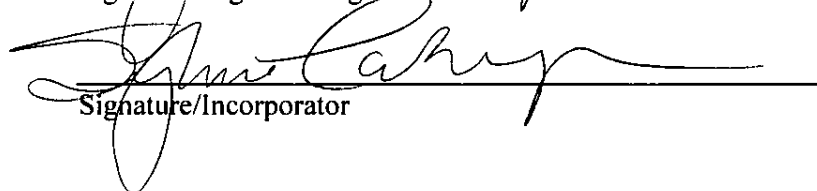
Sylvie LaBerge
10101 Courtyard Place West
Jacksonville, Florida 32256

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TALLAHASSEE, FLORIDA

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

07/09/09
Date


Signature/Incorporator

07/09/09
Date