

NO9000008144

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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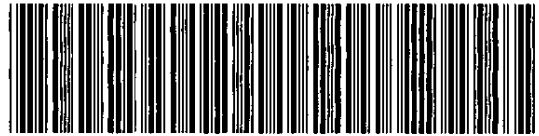
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Nch
8-20-09

COVER LETTER

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

SUBJECT: Shady Grove Primitive Baptist Church Inc. Gainesville, FL
(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: Evelyn Foxx
Name (Printed or typed)

959 SE 8th St
Address

Gainesville, FL 32601
City, State & Zip

352-870-7013
Daytime Telephone number

Foxxe@BellSouth.net
E-mail address: (to be used for future annual report notification)

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:

Shady Grove Primitive Baptist Church INC., Gainesville, FL

ARTICLE II PRINCIPAL OFFICE

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

804 SW 5th St
GAINESVILLE FL 32601

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Church (Religious Assembly)

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:

Directors are elected at Annual Meeting by the Church Members

ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS

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

E. M. Rollins, Pastor
George K. Foxx, Chairman
Randy Rivees, Vice Chairman
Bernice Smith, Treasurer
Evelyn Foxx, Clerk/Sec.

Alphonzo Cross, Trustee

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Evelyn Foxx
959 SE 8th St
GAINESVILLE FL 32601

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Evelyn Foxx
959 SE 8th St
GAINESVILLE FL 32601

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CLERK OF CIRCUIT COURT
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.

Evelyn Foxx
Signature/Registered Agent

8/17/09
Date

Evelyn Foxx
Signature/Incorporator

8/17/09
Date