

N 10000004 192

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

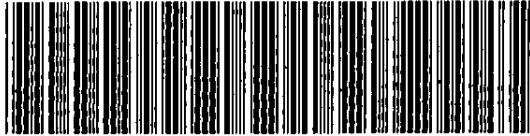
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
2010 APR 27 PM 3:42

J 4/28/10

**COVER LETTER**

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

**SUBJECT:** Community Missions Support, 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:** Community Missions Support, Inc.  
Name (Printed or typed)

6271 W. Hwy 4  
Address

Century, FL 32535  
City, State & Zip

850-327-6916  
Daytime Telephone number

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

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DIVISION OF CORPORATIONS

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

**ARTICLES OF IN CORPORATION**

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

FLA. SEC. OF STATE  
DIVISION OF CORPORATIONS

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**ARTICLE I NAME**

The name of the corporation shall be:

**Community Missions Support, Inc.**

**ARTICLE II PRINCIPAL OFFICE**

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

6271 W. Hwy 4  
Century, FL 32535  
Escambia County

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

**Said corporation is organized exclusively for charitable, religious, educational, and scientific purposes, including, for such purposes, the making of distributions to organizations that qualify as exempt organizations under section 501(c)3 of the Internal Revenue Code, or the corresponding section of any future federal tax code including, but not limited to:**

- (a.) To solicit, collect, receive, accumulate, administer, and disburse funds and property in such a manner as will, in the sole discretion of the board of directors, most effectively operate to further religious, charitable, scientific, literary, or educational purposes, either directly or by contributions to any organization described in Section 501(c)3 of the Internal Revenue Code of 1986, or the corresponding section of any future federal tax code.**
- (b.) To inform the public regarding the unique needs of Christian evangelical missions world-wide; to educate the public regarding the Christian services of the mission; to create channels of Christian ministry and service with the public to meet the various needs of foreign and domestic mission projects; to spread the Gospel of Jesus Christ by every means possible.**

**ARTICLE IV MANNER OF ELECTION**

The manner in which the directors are elected or appointed:

**The officers and members of the board of directors shall be elected or appointed at such time and in such manner and for such terms as may be prescribed in the by-laws.**

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

**Erich Peters, Executive Director/President**  
6271 W. Hwy 4  
Century, FL 32535

**Nancy Peters, Secretary and Treasurer**  
6271 W. Hwy 4  
Century, FL 32535

**Thomas Smith, Vice-President and Chairperson**  
3890 Macks Road  
Century, FL 32535

**Linda Smith, Director**  
9010 S. Pineville Rd.  
Walnut Hill, FL 32568

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

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

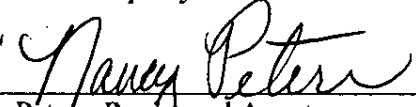
**Nancy Peters**  
6271 W. Hwy 4  
Century, FL 32535

**ARTICLE VII INCORPORATOR**

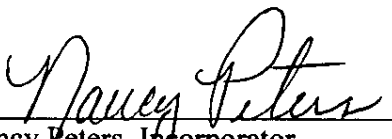
The name and address of the Incorporator is:

**Nancy Peters**  
6271 W. Hwy 4  
Century, FL 32535

*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.*

  
\_\_\_\_\_  
Nancy Peters, Registered Agent

4-19-2010  
Date

  
\_\_\_\_\_  
Nancy Peters, Incorporator

4-19-2010  
Date