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SECRETARY OF STATES

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## **COVER LETTER**

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

SUBJECT: Refuge Temple Church of Christ Inc. Tampa,FL (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

closed is an original	and one (1) copy of the Artic	les 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 CO	OPY REQUIRED		
	1				
FROM: Isiah Autry Name (Printed or typed)					
406 Francis Ave					
Address					
Tampa, FI 33602					
City, State & Zip					
(813) 221-7322(h) (813) 719- 0175(c)					
13294 Telephone number					
elderautry36@yahoo.com					
E-mail address: (to be used for future annual report notification)					

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

SECRETARY OF WAYLE DIVISION OF COME CAT

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## ARTICLES OF INCORPORATION

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

<b>ARTICLE I</b> The name of the co	NAME Refuge Temple Church riporation shall be:	n of Christ ind	c. Tampa, FL OI	01/11
ARTICLE II	PRINCIPAL OFFICE Principal street address 13294 Telecom Dr. Temple Terrence, fl.33637	Mailing address, if different is: 406 W Francis Ave Tampa, Fl 33602		
ARTICLE III	PURPOSE			
• -	hich the corporation is organized is:			
The purpose a Church.	for which this corporation is being org	anized is to	render religious service	s affiliated with
ARTICLE IV	MANNER OF ELECTION The manner in	which the directo	rs are elected and appointed:	
Appointed an	nually by the church board members	and Elder A	utry	
ARTICLE V	INITIAL OFFICERS AND/OR DIRECTO		•	
	tle: Elder Isiah Autry (President)		e:Pamela Daphne' Autry (\	
Address:	406 W Francis Ave Tampa, Fl 33602	_ Address:	14020 SW 32 Terrace R Ocala, Florida 34473	<u>a</u>
	Tallipa, F1 33002	<del>-</del>	Ocala, Florida 34473	
Name and Ti Address:	itle:Margaret P Autry (First Lady) 406 W Francis Ave Tampa, Fl 33602		e: <u>Elder Gregory L. Anders</u> 3838 W. Humphrey St. Tampa, Fl 33614	
Name and Ti	itle: Quinn Jackson	<ul> <li>Name and Titl</li> </ul>	e: Malcolm Lamar Autry-St	ephens
Address:	STORY STORY	Address: 1030 E 14th St Apt 307		
			Ocala, Florida 34471	
ARTICLE VI	REGISTERED AGENT	_		SECRET DIVISION O
	rida street address (P.O. Box NOT acceptable) of	the registered ag	ent is:	
Name:	Pamela Daphne' Autry			
Address:	14020 SW 32 Terrace Rd Ocala, Florida 34473	_		$\omega = \frac{\pi \Sigma}{\sigma z^2}$
<u>Ocala, F</u>	Ocala, Florida 34473	_		:-0-
ARTICLE VII	INCORPORATOR	T. F.	PECTIVE DATE.	<b>2</b> 55 5
	lress of the Incorporator is:	<u>EF</u>	FECTIVE DATE:	<b>?</b> 章
Name:	Elder Isiah Autry (President)		MIIADV 01 2011	<u></u>
Address:	406 W Francis Ave	JANUARY 01, 2011		, <del>v</del>
	Tampa, Fl 33602	<del>-</del>		
	<del></del>	_		
	ed as registered agent to accept service of proce miliar with and accept the appointment as register			e designated in thi

Required Signature of Registered Agent

I submit this document and affirm that the facts stated barein are true. Lam govern that any false information submitted in a document

I submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Sigh Required Signature of Incorporator

12 /27/2010