

N11000002845

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

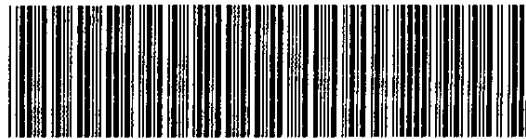
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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2/20/11 10:00 AM

11 MAR 17 PM 2:45

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COVER LETTER

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

SUBJECT: HARVEST OF PRAISE EVANGELISTIC 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: RAMIAH J. ATKINSON
Name (Printed or typed)

342 LACOSTA AVE
Address

PANAMA CITY, FL. 32404
City, State & Zip

(850) 215-3255
342 LaCosta Ave Telephone number

JATKINSON@PCRMISSION.ORG
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:

Harvest of Praise Evangelistic Ministries, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

342 LaCosta Ave

Panama City, FL 32404

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Harvest of Praise Evangelistic Ministries, Inc. exist to share the Gospel of Jesus Christ, to see lives transformed and to assist individuals toward successful re-entry after experiencing periods of incarceration. If this corporation is ever dissolved all assets will be donated to another charitable organization as directed by the officers and/or directors.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected and appointed:

Directors will be appointed according to demonstrated spiritual development and maturity.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Ramiah J. Atkinson, Pastor/President

Address: 342 LaCosta Ave.
Panama City, FL 32404

Name and Title: Betty J. Atkinson, Co-Pastor/Vice President

Address: 342 LaCosta Ave
Panama City, FL 32404

Name and Title: Bianca L. Winfield

Address: 342 LaCosta Ave
Panama City, FL 32404

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: Betty J. Atkinson

Address: 342 LaCosta Ave.
Panama City, FL 32404

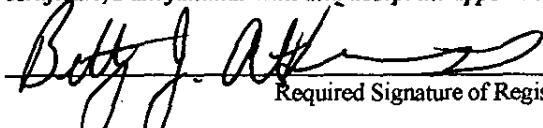
ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Ramiah J. Atkinson

Address: 342 LaCosta Ave.
Panama City, FL 32404

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

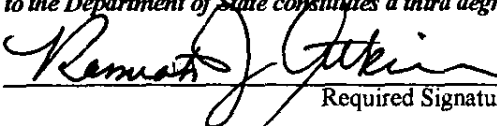


Required Signature of Registered Agent

March 9, 2011

Date

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.



Required Signature of Incorporator

March 9, 2011

Date

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