

N 11000000 5600

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

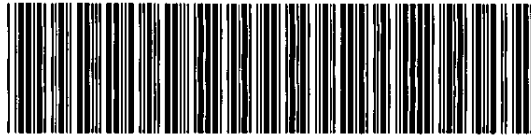
(Business Entity Name)

(Document Number)

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11 JUN -9 PM 2:20
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FILED
11 JUN -9 PM 2:39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

6/9/11

COVER LETTER

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

SUBJECT: The New Saints Christian Academy and Children's Home, 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: J. S. Sutterfield, Ph.D., R.P.E.
Name (Printed or typed)

1171 Landings Loop
Address

Tallahassee, FL 32311-1232
City, State & Zip

850-668-4914
3246 Durbin Drive Tallahassee, Florida Telephone number

pisces4914@earthlink.net
E-mail address: (to be used for future annual report notification)

11 JUN - 9 AM 2:38
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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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 New Saints Christian Academy and Children's Home, Inc.
The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE

Principal <u>street</u> address	Mailing address, if different is:
<u>3246 Dungarvan Drive</u>	<u>Same</u>
<u>Tallahassee, FL 32309</u>	_____
_____	_____

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
To equip students with the information, ability, ethics and confidence to become skilled and successful contributors to society, the home and the Kingdom. We pledge to engage students to achieve their full potential in Christ.

ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected and appointed:
The Directors will be selected according to by-laws.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: <u>Charla Mullinax, President</u>	Name and Title: _____
Address: <u>3246 Dungarvan Drive</u>	Address: _____
<u>Tallahassee, FL 32309</u>	_____
_____	_____
Name and Title: <u>Robert Mullinax, Vice-president</u>	Name and Title: _____
Address: <u>3246 Dungarvan Drive</u>	Address: _____
<u>Tallahassee, FL 32309</u>	_____
_____	_____
Name and Title: <u>J. S. Sutterfield, Secretary</u>	Name and Title: _____
Address: <u>1171 Landings Loop</u>	Address: _____
<u>Tallahassee, FL 32311-1232</u>	_____
_____	_____

ARTICLE VI REGISTERED AGENT

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

Name: Charla Mullinax
Address: 3246 Dungarvan Drive
Tallahassee, FL 32309

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: J. S. Sutterfield, Ph.D., R.P.E.
Address: 1171 Landings Loop
Tallahassee, FL 32311-1232

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SECRETARY OF STATE
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

Charla B. Mullinax 6-8-2011
Required Signature of Registered Agent 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 s817.155, F.S.

J.S. Sutterfield 6-8-2011
Required Signature of Incorporator Date