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11 JUN 20 AM 8:40

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: **AGAPE HELPS INJ, 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: **Edward Ingram**

Name (Printed or typed)

423 W 23rd Street

Address

Jacksonville, FL 32206

City, State & Zip

904-673-2300

Telephone number

edwardingram98@yahoo.com ✓

E-mail address: (to be used for future annual report notification)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

To: Secretary of State of Florida

I, Edward Ingram, agree not to revoke the name of the dissolved corporation, AGAPE HELPS INJ, Inc. located at 423 W 23rd Street in Jacksonville, FL 32206.

I do hereby permit the immediate assumption or use of the name AGAPE HELPS INJ, Inc. by another entity.

Edward Lewis Ingram

Date: Jun 16, 2011

Edward Ingram

Incorporator

904-673-2300

Edwardingram98@yahoo.com

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

AGAPE HELPS INJ, Inc.

The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE

Principal street address

423 W 23rd Street

Jacksonville, FL 32206

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

This corporation is organized to provide shelter, education and substance abuse rehabilitation of individuals that are HIV/AIDS

ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected and appointed:

As defined in the corporation's bylaws

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Pending

Address: _____

Name and Title: _____

Address: _____

Name and Title: Pending

Address: _____

Name and Title: _____

Address: _____

Name and Title: Pending

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: Edward Ingram

Address: 423 W 23rd Street

Jacksonville, FL 32206

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Edward Ingram

Address: 423 W 23rd Street

Jacksonville, FL 32206

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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

Edward Lewis Ingram

Required Signature of Registered Agent

June 16, 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.

Edward Lewis Ingram

Required Signature of Incorporator

June 16, 2011
Date