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(Requestor's Name)

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☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

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*Adrian West*  
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DATE *2-19-10*  
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*2010-13895*

*1.84* MAR 19 2010

## COVER LETTER

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

SUBJECT: Spirit of Excellence Christian Center  
(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: Pastor Adrian S. Weeks  
Name (Printed or typed)

885 SW 2nd Street  
Address

Lake Butler, FL 32054  
City, State & Zip

352-258-4518  
Daytime Telephone number

Adrianweeks@ymail.com  
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:

Spirit of Excellence Christian Center, Inc.

**ARTICLE II PRINCIPAL OFFICE**

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

161010 NW 140th Street, Alachua, FL 32615

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Religious/Ministry

**ARTICLE IV MANNER OF ELECTION**

The manner in which the directors are elected or appointed:

Appointed/Vote

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

List name(s), address(es) and specific title(s):

Pastor Adrian S. Weeks - 885 SW 2nd Street Lake Butler, FL 32054 - CEO/President

Pastor Kimara Watts - 3925 NW 48th Place Gainesville, FL 32606 - Vice President

Gary Holmes - 6297 SW CR 241-A, Lake Butler, FL 32054 - Treasurer

Jazmine Mendez - 3925 NW 48th Place Gainesville, FL 32606 - Secretary

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

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

Pastor Adrian S. Weeks - 885 SW 2nd Street, Lake Butler, FL 32054

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Pastor Adrian S. Weeks - 885 SW 2nd Street, Lake Butler, FL 32054

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*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.*

\_\_\_\_\_  
Signature/Registered Agent

3-16-2010  
Date

\_\_\_\_\_  
Signature/Incorporator

3-18-2010  
Date

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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