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12 JAN 17 PM 12:11
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FILED
12 JAN 17 PM 12:25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MRS
1/17/12

COVER LETTER

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

SUBJECT: Hedges & Highway Outreach 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: Priscilla M. Johnson
Name (Printed or typed)

1519 West Orange Ave.
Address

Tallahassee, Florida 32310
City, State & Zip

850-224-4659
1519 West Orange Ave. Telephone number

sispmj@embarqmail.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: **Hedges & Highway Outreach Ministries, Inc.**

ARTICLE II PRINCIPAL OFFICE

Principal street address
1519 West Orange Ave.
Tallahassee, Florida 32310

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Hedges & Highway Outreach Ministries, Inc. is to bring hope and encouragement to those within the prison walls/ex-offenders; acting as an arm of the local church, empowering by the spirit of God and aiding them back into the main stream of life.

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

Appointed

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Wilborn, Albert - CEO
Address: 1519 West Orange Ave.
Tallahassee, Florida 32310

Name and Title: _____
Address: _____

Name and Title: Johnson, Priscilla - T
Address: 1519 West Orange Ave.
Tallahassee, Florida 32310

Name and Title: _____
Address: _____

Name and Title: York, Catina - S
Address: 1519 West Orange Ave.
Tallahassee, Florida 32310

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: Catina York
Address: 1519 West Orange Ave.
Tallahassee, Florida 32310

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Priscilla Johnson
Address: 1519 West Orange Ave.
Tallahassee, Florida 32310

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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

Catina York
Required Signature of Registered Agent

1/17/12
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.

Priscilla M. Johnson
Required Signature of Incorporator

1/17/2012
Date