

N120000003447

(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



100226241741

04/03/12--01009--002 **78.75

RECEIVED
12 APR -3 AM 8:57
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE FLORIDA

FILED
12 APR -3 AM 9:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: PATS PANTRY FOR THE POOR
(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: PATRICIA SMITH INC.
Name (Printed or typed)

212 GOLDWIRE ROAD
Address

QUINCY FLORIDA 32352
City, State & Zip

850-875-2133
212 GOLDWIRE ROAD phone number

PATSPANTRY1@YAHOO.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: PATIS PANTRY FOR THE POOR INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address
212 Goldwire Rd
QUINCY FT.
32352

Mailing address, if different is:
PATIS PANTRY
BOX 1063
QUINCY FT 32353

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
Feeding the Homeless etc
Also supplying clothing at times.

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: PASTOR RONALD McCloud
Address: 108 Astor Avenue
QUINCY FT. 32352

Name and Title: MIC (Chief) Jerry Lang
Address: 1283 Providence Rd.
Whigham Ga
39897

Name and Title: Scott Beigle (Faith Radio)
Address: MONROE ST
PA 18100
Tell. 32318
Ft - 32318

Name and Title: Minister Eddie Moore
Address: 315 Goldwire Rd
QUINCY FT.
32352

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: PATRICIA SMITH
Address: 212 Goldwire Rd
QUINCY FT.
32352

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: PATRICIA SMITH
Address: 212 Goldwire Rd
QUINCY FT.
32352

FILED
12 APR - 3 AM 9:05
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

Patricia Smith
Required Signature of Registered Agent

April 2, 2012
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.

Patricia Smith
Required Signature of Incorporator

April 2, 2012
Date