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SECRETARY OF STATE
ALLAMASSEE, FLORING

Bausch, APR 2 -

COVER LETTER

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

7\$70.00

SUBJECT: New Saint James African Methodist Episcopal Church
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is an original and one (1) copy of the Articles of Incorporation and a check for:

Filing Fee	Filing Fee & Certificate of Status	Filing Fee & Certified Copy	Filing Fee, Certified Copy & Certificate	
		ADDITIONAL CO	OPY REQUIRED	
FROM	i: New Saint Same Name (P	25 African McHa rinted or typed)	<u>d</u> ist Epislopa	I church
	2128 Forcs	t Street Address	_	
	Sacksonvill City,	C Florida 32 State & Zip	204	
	904-354- Daytime T	- 3282 elephone number	_	
	newstiame & E-mail address: to be used for	aol. Com future annual report notificat	tion)	

\$78.75

]\$87.50

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



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FLORIDA DEPARTMENT OF STATE OF CORPGRATIONS

April 13, 2012

NEW SAINT JAMES AFRIAN METHODIST EPISCOPAL CHURCH 2128 FOREST STREET JACKSONVILLE, FL 32204

SUBJECT: NEW SAINT JAMES AFRICAN METHODIST EPISCOPAL CHURCH Ref. Number: W12000020743

We have received your document for NEW SAINT JAMES AFRICAN METHODIST EPISCOPAL CHURCH and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name must contain a word that will clearly indicate that it is a corporation. This word may be: CORPORATION, CORP., INCORPORATED, or INC. Sections 617.0401(1)(a) and 617.1506(1), Florida Statutes, prohibits the use of the word COMPANY or CO. in the name of a non-profit corporation.

If you have any further questions concerning your document, please call (850) 245-6052.

Tim Burch Regulatory Specialist II New Filing Section

Letter Number: 712A00011755

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

ARTICLE II	PRINCIPAL OFFICE	Inc
	, , , , , , , , , , , , , , , , , , , 	Mailing address, if different is:
	Principal <u>street</u> address AIBS FOREST STREET	<u>game</u>
	Jacksonville, Florida 32204	
ARTICLE III	PURPOSE	12 SE TAL
	which the corporation is organized is: Church	, ,
ne puipose ioi	which are corporation is organized is. Charlet	APR (
	·	FILE 723 1ARYI 1ASSEI
ARTICLE IV	MANNER OF ELECTION The manner in which the director	PH D
	at Church Conference by church w	
ARTICLE V	INITIAL OFFICERS AND/OR DIRECTORS	
Name and I Address:	Fitle: Brenda Solomon-Secretary Name and Tit	le: Carolyn Hill - Irustee 8084 West 25th Street
	183.T JOEKSONVILL, Florida 388.10	Jacksonville, Florida 32808
Name and 3	Fitle: JOLY Smith - Trustee Name and Tit	le: Rhonda Boyd-Trustee
`Address:	886 Country Blod Cirele North Address: Sack son Ville, Funda. 38844	9381 Arbor Vak Lane Sacksonville, Florida 32208
N 10	Fitle: Bobbie Anderson - Trustle Name and Tit	le: Brenda Sones - Trustee
Address:	Title: <u>BOBBIC ANXLYSON - TrusHL</u> Name and Tit 2988 SUDDISIDE STREET Address:	HILLS PAGELLEDO DOLLA
Addiess.	Sackson Ville, Florida 38354	JOCKSONVILL, Florida.
ARTICLE VI	REGISTERED AGENT	
	orida street address (P.O. Box NOT acceptable) of the registered ag	gent is:
Name:	Lexau West	
Address:	Jacksonvilly Aprila.	
ARTICLE VII	INCORPORATOR	
he <u>name and ad</u>	dress of the Incorporator is:	
Name:	Mey, Thuga ella P. Smith	
Address:	JOEKSONVIlle, Florida 32221	
Inving hom was	ned as registered agent to accept service of process for the above	stated comparation at the place decionated in this
	amiliar with and accept the appointment as registered agent and agr	
Leron	A Nest	4/1/12
	Required Signature of Registered Agent	Date
	iment and affirm that the facts stated herein are true. I am aware t t of State constitutes a third degpet/felony as provided for in s.817.1:	
Den 1	How della Donita	4-1-12
KEV 11	Required Signature of Incorporator	Date