ME880000511

(Requestor's Name)		
(Address)		
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	· #)
PICK-UP	☐ WAIT	MAIL
(Ru	siness Entity Nam	ne)
(Du	·	ie,
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	<u> </u>
-		
		•
		ļ

Office Use Only



200239374342

09/18/12--01001--007 **78.75

RECEIVE 3: 54

SEP 17 PM 4: 16

a 9/17/12

COVER LETTER

11.

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

Enclosed is an original and one (1) copy of the Articles of Incorporation and a check for: \$70.00 \$78.75 \$87.50 Filing Fee Filing Fee & JFiling Fee Filing Fee, Certificate of & Certified Copy Certified Copy & Certificate Status ADDITIONAL COPY REQUIRED FROM: First HolyLand Church
Name Printed or typed) 13042 W. Hwy 90

Address

Greenville Flq. 32371

City, State & Zip

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

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

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

The name of the corporation shall be: First Holyland Church	Inc. FILED
ARTICLE II PRINCIPAL OFFICE Principal street address	Mailing address, if different is:
Greenville FU 32331	TALLAHASSEE FLORIDA
ARTICLE III PURPOSE The purpose for which the corporation is organized is: To educate 4 back to the	oung people book.
ARTICLE IV MANNER OF ELECTION The manner in which the directors Church By aws ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS Name and Title: Lary W. Wans - Trustee Name and Title: Address: 3538 Vga DR. # 3-10 Address: Address: 1248 Address: 32303	are elected and appointed:
Name and Title: Ar dina Lyons_Trustee Name and Title: Address: 913 Drych Circle Address: Address:	
Name and Title: U'Cake Foreman - Trustee Name and Title: Address: Address: Address: Address: Address:	
ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT accentable) of the registered agent Name: Address: Lafty W. Hanks Greenville Fil 3283;	t is:
ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Name: Address: Address	
Having been named as registered agent to accept service of process for the above secretificate, I am familiar with and accept the appointment as registered agent and agree	tated corporation at the place designated in this to act in this capacity
	9-17-12 Date
Required Signature of Registered Agent	Date
I submit this document and affirm that the facts stated herein are true. I am aware the to the Department of State constitutes a third degree felony as provided for in s.817.155.	, F.S.
Parallel Single	9-17-12 Date
Required Signature of Incorporator	Date