

11/9/12

COVER LETTER

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

SUBJECT: The Lord's Elect Church, 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: Clarence Watts Sr.

Name (Printed or typed)

8823 Fieldside Court

Address

Jacksonville, FL 32244

City, State & Zip

904-422-6331

Daytime Telephone number

Clarencewatts828@yahoo.com

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

12 NOV - 8 PM 4: 21

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

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: The Lord's Elect Church, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address
8823 FIELDSDIE COURT
JACKSONVILLE, FL. 32244

Mailing address, if different is:
8823 FIELDSDIE COURT
JACKSONVILLE, FL. 32244

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Said Corporation is organized exclusively for charitable, religious and educational purposes.

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

All Directors etc., will be appointed by the Pastor / President

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: CLARENCE WATTS SR - PRESIDENT / PASTOR
Address: 8823 FIELDSDIE COURT
JACKSONVILLE, FL. 32244

Name and Title: _____
Address: _____

Name and Title: VICTOR FIGUEROA JR - VICE PRESIDENT
Address: 1515 CRICHTON ROAD WEST
JACKSONVILLE, FL. 32221

Name and Title: _____
Address: _____

Name and Title: _____
Address: ARETHA FIGUEROA - OFFICER / Admin.
1515 CRICHTON ROAD WEST
JACKSONVILLE, FL. 32221

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: CLARENCE WATTS SR
Address: 8823 FIELDSDIE COURT
JACKSONVILLE, FL. 32244

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: CLARENCE WATTS SR
Address: 8823 FIELDSDIE COURT
JACKSONVILLE, FL. 32244

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

Clarence Watts Sr.

Required Signature of Registered Agent

11-4-12

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.

Clarence Watts Sr.

Required Signature of Incorporator

11-4-12

Date

FILED
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