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13 JAN 25 AHII: 55
SECRETARY OF STATE



COVER LETTER:

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

SUBJECT: East Grove Missionary Baptist 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 □ \$78.75 □ \$78.75

Filing Fee Filing Fee & Filing Fee, Certificate of Status

ADDITIONAL COPY REQUIRED

FROM: Timothy E. Whitfield

Name (Printed or typed)

8477 Titus Lane

Address

Tallahassee, FL 32305

City, State & Zip

850-459-8403

Daytime Telephone number

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 wit	h Chapter 617, F.S.; (Not for Profit)
ARTICLE I	NAME ne corporation shall be: East Grove I	Missionary Baptist Church, Inc.
ARTICLE II	ic corporation shall be.	
ARTICLET		
164	Principal <u>street</u> address: I2 Oakridge Road	Mailing address, if different is: P.O. BOX
	podville, FL 32305	Woodville, FL 32362
ARTICLE I	II PURPOSE	xclusively for charitable, religious, educationa
and sci	entific purposes; including if	or such purposes, the making of distributions to
		npt organizations under section 501 (c) (3)
	14.	esponding section of any future federal tax code
Or trie mi	email (evenue dode, or don	
ARTICLE I	V MANNER OF ELECTION The n	nanner in which the directors are elected and appointed:
		t system. Directors shall serve a two year term.
ARTICLE	V INITIAL OFFICERS AND/OR D	<u>IRECTORS</u>
Name and Tit	Ronald Wiggins, Pastor	Name and Title: Timothy E. Whitfield,
Address	8018 Black Jack Rd	Address: 8477 Titus Lane
radiress.	Tallahassee, FL 32305	Tallahassee, FL 32305
	Richard Harris, Decon	
Name and Tit	1642 Oakridge Rd.	Name and Title:
Address	Woodville, FL 32305	Address:
	VVOOdVIIIE, I L 02000	
Name and Ti	flet <u>e</u> and the second	Name and Title:
Address		Address:

Name and Title:		Name and Title:	
Address		Address:	
	<u></u>	•	
Name and Title:		Name and Title:	
Address		Address:	
			
	 		
ARTICLE VI	REGISTERED AGENT		
The name and Flo	rida street address (P.O. Box NOT accept	table) of the registered agent is:	
Name:	Timothy E. Whitfield		As =
Address:	8477 Titus Lane		3
	Tallahassee, FL 32305	<u> </u>	25 Pm
ARTICLE VII	TMOODDOD 4 WOD		MH: 55
	INCORPORATOR Iress of the Incorporator is:		
Name:	Timothy E. Whitfield		S5 NTE RIDA
Address:	8477 Titus Lane		
	Tallahassee, FL 32305	<u></u>	
certificate, I am fa	ed as registered agent to accept service o miliar with and accept the appointment as		
10 lines	The Williams		x 1-28-2013
	Required Signature of Registered	Agent	Date
	ment and affirm that the facts stated herei of State constitutes a third degree felony a		e information submitted in a document
x langu	M. J. Whillief	<u></u>	1-25-2013
Ju.	Required Signature of Incorp	orator	Date

Non-Profit Articles of Incorporated

Addendum

ATRICLE VII DISSOLUTION OF ORGANIZATION

Upon the dissolution of the organization, assets shall be distributed for one or more exempt purposes within the meaning of section 501 (c) (3) of the Internal Revenue Code, or corresponding section of any future federal tax code, or shall be distributed to the federal government, or to a state or local government, for a public purpose. Any such assets not disposed of shall be disposed of by a Court of Competent Jurisdiction of the county in with the principal office of the organization is then located, exclusively for such purposes or to such organization or organizations, as said Court shall determine, which are organized and operated exclusively for such purposes.

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SECRETARY OF STATE
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