

N130000007241

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☒ WAIT

☐ MAIL

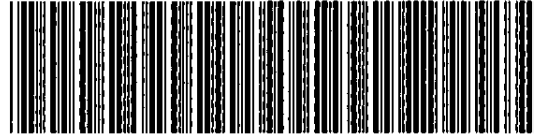
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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DIVISION OF CORPORATIONS
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APPROVED
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13 AUG 13 PM 3:28
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: Adventures In Gods Creation 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: James Roosevelt Stockton III
Name (Printed or typed)

115 1st Ave North
Address

Jacksonville Beach FL 32250
City, State & Zip

904 699-0009
Daytime Telephone number

Adventure in Gods Creation @ Gmail.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: Adventures in Gods Creation Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address:

115 1st Ave North
Jacksonville Beach FL
32250

Mailing address, if different is:

P.O. Box 285
Ponte Vedra Beach FL
32004

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Church Ministry and mission
related work

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

Voting

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: James Roosevelt Stockton III President

Address: P.O. Box 285 Address: _____

Ponte Vedra Bch FL
32004

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

APPROVED
AND
FILED
13 AUG 13 PM 3:28
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

APPROVED
AND
FILED

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

13 AUG 13 PM 3:28

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: James Roosevelt Stockton III

Address: 115 1st Ave North
Jacksonville Beach FL. 32250

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: James Roosevelt Stockton III

Address: 115 1st Ave North
Jacksonville Beach FL. 32250

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

[Signature]
Required Signature of Registered Agent

8/13/13
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.

[Signature]
Required Signature of Incorporator

8/13/13
Date