

N14000002192

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

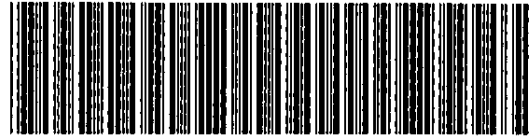
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SECRETARY OF STATE
DIVISION OF CORPORATIONS
14 MAR - 6 AM 9:28

PEOS 3/4/14
CC

COVER LETTER

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

SUBJECT: The Awakening Church of Tampa Bay, 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: Joseph Hufstetler
Name (Printed or typed)

718 W. Harlan St.
Address

Tampa FL 33602
City, State & Zip

(813) 900-6273
Daytime Telephone number

JoeHuf76@gmail.com
E-mail address: (to be used for future annual report notification)

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

ARTICLE I NAME

The name of the corporation shall be: The Awakening Church of Tampa Bay, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address:

718 W Harlan St.
Tampa, FL 33602

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: The Church Is being Organized Because I
feel The Call of God to do So. The Purpose Is to Bring The Gospel to the
World, To Awaken, Restore, Empower and to send Forth, With The help
of a group of Advisors to move forward with a vision, walk in Integrity
and Changing Peoples Lives for Jesus Christ.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected and appointed: The members
Get to vote on the Directors and Advisors of The Church

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Joseph Hofstetler / P Name and Title: _____

Address: 718 W Harlan St. Address: _____

Tampa, FL 33602

Name and Title: Sarah Howard / Secretary Name and Title: _____

Address: 718 W Harlan St. Address: _____

Tampa, FL 33602

Name and Title: David Hofstetler / Treasurer Name and Title: _____

Address: 718 W Harlan St. Address: _____

Tampa, FL 33602

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
14 MAR - 6 AM 9:28

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

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: Joseph Hufstetler

Address: 718 W Harlan St.

Tampa, FL 33602

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Joseph Hufstetler

Address: 718 W Harlan St.

Tampa, FL 33602

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

Joseph Hufstetler

Required Signature of Registered Agent

Feb. 22, 14

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.

Joseph Hufstetler

Required Signature of Incorporator

Feb. 22, 14

Date