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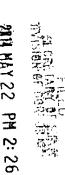
(Requestor's Name)				
(Address)				
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(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
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COVER LETTER

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

SUBJECT:	Second Church of Christ, Scientist, Inc., a	5F
_	(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)	
	Sarasota, Florida	L

Enclosed is an original and one (1) copy of the Articles of Incorporation and a check for :

□ \$70.00 **X** \$78.75 Filing Fee & Certificate of Filing Fee

□\$78.75

\$87.50

Filing Fee & Certified Copy Filing Fee,

Certified Copy

& Certificate

ADDITIONAL COPY REQUIRED

941-755-4980 Daytime Telephone number

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

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

The name of the corporation shall be: Second C	hurch of Christ Scientist, Inc., of Sarasota, Florida
ARTICLE II PRINCIPAL OFFICE	Sarasota, Florida
Principal street address:	Mailing address, if different is:
7972 N. Tamiami T	U-,
Sarasota FL 342	43
ARTICLE III PURPOSE	A Sign
The purpose for which the corporation is organized is:	a branch church of Their Their
	clertist in Boston, Mass, I
	eys and Wednesdays, have 32
Reading Room on premise	e. We are anot-for-profit religious
organization.	
3.	
	nanner in which the directors are elected and appointed: elected by
ARTICLE IV MANNER OF ELECTION The n	Church Membership,
ARTICLE V INITIAL OFFICERS AND/OR DE	RECTORS
The state of the s	west Thu Chamberlain For
Name and Title: VOFTS MI, Vav13 Secy	Mame and Title: John Chamberlain, Pres. Address: 451 62d Street
· · · · · · · · · · · · · · · · · · ·	
Bradenton FL 34281	Holmes Beach, FL 34217
·	
Name and Title:	Name and Title:
Address	Address:
Name and Title:	Name and Title:
Address	Address:
Audites	

		UNISION OF OPER SERVICE
Name and Title:	Name and Title:	ZALL HAV 22
Address	Address:	2814 MAY 22 PM 2: 26
Name and Title:	Name and Title:	
Address	Address:	
	Address.	
ARTICLE VI REGISTERED AGENT		
he name and Florida street address (P.O. Box NOT		is:
Name: Doris M. Dai	ازح	
Address: 6-7972 N. Tamia	me Tr.	
Savasota FL	34243	
ARTICLE VII INCORPORATOR		
he name and address of the Incorporator is:	•	
Name: Dovis M. Da		
Address: Po Box 6144		
Bradenton FL 3		

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

Required Signature of Registered Agent 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.

Required Signature of Incorporator

N 55