## N14000005500

(Re	equestor's Name)	
(Ad	dress)	
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(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
	•	
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
		-

Office Use Only



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SECRETARY OF STATE SECRETARY OF STATE FLORIDA

APPROVET.

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## **COVER LETTER**

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

Glory Sabbatical House, 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: J. K. Laslene Glymph

Name (Printed or typed)

315 Southall Road

West Columbia, SC 29172

City, State & Zip

Daytime Telephone number

iklglymph@yahoo.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)



he name of the	•		e, Inc. 14 JUN-9 PM 2: 26
215	Principal street address:  1 Deck Court		SECRETARY OF STATE Mailing address; Arthresen is LORIDA
Del	tona, FL 32738		
	T PURPOSE  r which the corporation is organized is: To with an environment condu		astoral families places of tempo eet their sabbatical needs.
Dator B III			Appointe
RTICLE IV	MANNER OF ELECTION The ma	anner in which the	e directors are elected and appointed: Appointe
			e directors are elected and appointed: Appointe
ARTICLE V	INITIAL OFFICERS AND/OR DI	RECTORS	s directors are elected and appointed.
ARTICLE V		RECTORS  Name and Title	s directors are elected and appointed.
RTICLE V	<i>INITIAL OFFICERS AND/OR DI</i> J. K. Laslene Glymph, President	RECTORS	Marshall Fagg, Board Chairman
ARTICLE V ame and Title	J. K. Laslene Glymph, President 315 Southall Road West Columbia, SC 29172	RECTORS  Name and Title Address:	Marshall Fagg, Board Chairman  1452 White Horse Road  Greenville, SC 29605
ame and Title ddress ame and Title	J. K. Laslene Glymph, President 315 Southall Road West Columbia, SC 29172	RECTORS  Name and Title Address:  Name and Title	Marshall Fagg, Board Chairman  1452 White Horse Road
ARTICLE V  Iame and Title  ddress	J. K. Laslene Glymph, President 315 Southall Road West Columbia, SC 29172 Dane Dawkins, Treasurer	RECTORS  Name and Title Address:	Marshall Fagg, Board Chairman  1452 White Horse Road  Greenville, SC 29605  Harry Amos, Board Member
ame and Title ddress ame and Title ddress	J. K. Laslene Glymph, President 315 Southall Road West Columbia, SC 29172  Dane Dawkins, Treasurer 2151 Deck Court	RECTORS  Name and Title Address:  Name and Title Address:	Marshall Fagg, Board Chairman  1452 White Horse Road  Greenville, SC 29605  Harry Amos, Board Member  514 S Parramore Ave  Orlando, FL 32805
ddress	J. K. Laslene Glymph, President 315 Southall Road West Columbia, SC 29172 Dane Dawkins, Treasurer 2151 Deck Court Deltona, FL 32738	RECTORS  Name and Title Address:  Name and Title Address:	Marshall Fagg, Board Chairman  1452 White Horse Road  Greenville, SC 29605  Harry Amos, Board Member  514 S Parramore Ave  Orlando, FL 32805

,	,		APPROVEC AND
Name and Title:_		Name and Title:	FILED
Address		Address:	14 JUN -9 PM 2: 26
		<u> </u>	SECRETARY OF STATE TALLAHASSEE, FLORIDA
Name and Title:_		_ Name and Title:	
Address		Address:	
_			
_		-	
		•	·
ARTICLE VI The name and Flo	REGISTERED AGENT  orida street address (P.O. Box NOT acco	eptable) of the registered ag	ent is:
Name:	Dane Dawkins	. , , ,	
Address:	2151 Deck Court	<del></del>	
	Deltona, FL 32738	<del></del>	
		<del></del>	
ARTICLE VII The name and ad	<u>INCORPORATOR</u> dress of the Incorporator is:		
Name:	J. K. Laslene Glymph		
Address:	315 Southall Road	<del></del>	
	West Columbia, SC 2	9172	
		<del></del>	
Having been nan	ned as registered agent to accept service imiliar with and accept the appointment	of process for the above . as registered agent and ag	stated corporation at the place designated in the
<i>yy</i> -	Ago Stail	7:	6/5/11
	Required Signature of Registered	d Agent	
I submit this docu to the Department	ment and affirm that the facts stated her t of State constitutes a third degree felony	ein are true. I am aware th	/ / at any false information submitted in a docume 55. F.S.
ako		•	1 1
JUSZ	Easlene Slepush Required Signature of Inco	rporator	5/30/2014 Date
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