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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

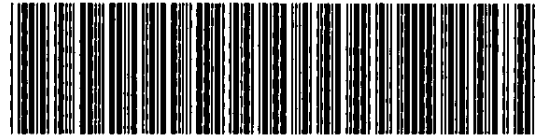
☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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JUN 24 PM 4:04

SECRETARY OF COMMERCE

Office Use Only

BW1400037305 6/10/14
B 6/24/14



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 16, 2014

DEACON JOSEPH GARVIN
P.O. BOX 613
CALLAHAN, FL 32011

SUBJECT: THE NEW GOOD SHEPHERD MISSIONARY BAPTIST CHURCH,
INC.
Ref. Number: W14000037305

We have received your document for THE NEW GOOD SHEPHERD MISSIONARY BAPTIST CHURCH, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The title(s) in the officer/director field(s) is/are not acceptable. Please refer to the following link for acceptable officer/director title information.
<http://www.sunbiz.org/titledef.html>.

A corporation may not act as its own incorporator. Please designate an individual, another active domestic or foreign corporation, with a street address.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Tyrone Scott
Regulatory Specialist II
New Filings Section

Letter Number: 714A00012975

COVER LETTER

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

SUBJECT: The New Good Shepherd Missionary Baptist Church
(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: Deacon Joseph Garvin
Name (Printed or typed)

PO Box 613
Address

Callahan, FL 32011
City, State & Zip

(904) 703-8991
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.

TAYLORS HEATING & AIR CONDITIONING INC.
538 LOCUST STREET
JACKSONVILLE, FL 32254
PHONE- (904) 387-2106
FAX- (904) 389-3209

To: Lynne Scott
Fax 850-245-6804

From: Tammy Taylor 6805
EMAIL-taylortl@bellsouth.net

Date: 6/24/14

ATTENTION: #6805

RE: New Good Shepherd Miss. Baptist
2816 Edison Ave.

fax I.L.

Document Corrections.

approved by Joseph Martin

J. A. Smith

Please send confirmation to:
904-389-3209 - Attn: Tammy Taylor

SECRET
DIVISION OF CONSTITUTIONAL AFFAIRS
JUN 24 PM 4:04

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

ARTICLE I NAME

The name of the corporation shall be: The New Good Shepherd Missionary Baptist Church, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address:

2616 Edison Avenue
Jacksonville, FL 32254

Mailing address, if different is:

P O Box 613
Callahan, FL 32011

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: The purpose of which the organization called The New Good Shepherd Missionary Baptist Church, Inc. is organized are exclusively religious, charitable, literary and educational within the meaning of Section 501(c)(3) of the Internal Revenue Code of 1986, or the corresponding provision of any future United States Internal Revenue Law. The purpose also shall be to cultivate, promote, promulgate and extend the teachings and precepts of Jesus Christ. In addition, to maintain a biblical Christian church, providing a place of worship.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected and appointed: The method of election of directors shall be stated in the bylaws.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Joseph Garvin
Address: P O Box 613
Callahan, FL 32011
Director CEO

Name and Title: John McCray
Address: 9635 Evesham Rd
Jacksonville, FL 32208
Trustee

Name and Title: Nedeffale Newsome
Address: Assistant Director
3042 Saturn Ave
Jacksonville, FL 32206

Name and Title: Sammie Everson
Address: 3262 Rayford Rd
Jacksonville, FL 32205
Secretary

Name and Title: Carl Williams
Address: 1312 L Engle Street
Jacksonville, FL 32208
P

Name and Title: Clayton Taylor
Address: 844 Day Ave.
Jacksonville, FL 32205
Trustee

12 JUN 24 PM 4:06

SECRETARY OF STATE
DIVISION OF CORPORATIONS

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 Garvin

Address: 54230 Plantation Road
Callahan FL 32011

STATE OF FLORIDA
DIVISION OF CORPORATIONS
JUN 24 PM 4:04

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Joseph Garvin
~~The New Good Shepherd Missionary Baptist Church~~

Address: 2816 Edison Avenue
Jacksonville, FL 32254

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 Garvin
Required Signature of Registered Agent

6-4-2014
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 Garvin
Required Signature of Incorporator

6-4-2014
Date