

NA00000008360

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name) ✓

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600262231686

09/08/14--01026--001 **78.75

14 SEP -8 AM 7:46
SECRETARY OF STATE
TALLAHASSEE FL 32399

COVER LETTER

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

SUBJECT: Messengers of Hope Mission, 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: Robert R. Gardner
Name (Printed or typed)

PO Box 732
Address

Odeesa FL 33556
City, State & Zip

813-404-2300
Daytime Telephone number

MessengersOFHope1@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: Messengers of Hope Mission, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address:

Mailing address, if different is:

14106 Manda Ct Odessa FL 33556

PO Box 732 Odessa FL 33556

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Messengers of Hope Mission's
purpose is to help feed the hungry & and the
homeless by sharing the love of Jesus in practical ways.
Our goal is to feed the poor and homeless, but our purpose is
to empower people to overcome poverty and live meaningful
purpose driven lives. We want to reach not just men and
women, but children and teenagers as well.

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

Directors are appointed by the founding board.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Robert Gardner President
of Board

Address: 14106 Manda Ct
Odessa FL 33556

Name and Title: Brenda Smith, Board

Address: 14106 Manda Ct
Odessa, FL 33556

Name and Title: Liz Montefu, Board

Address: 11307 Sandpine Rd
Riverview FL 33569

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

14 SEP -8 AM 7:45
SECRETARY
TALLAHASSEE
FLORIDA

011 00

Name and Title: _____

Address _____

Name and Title: _____

Address: _____

Name and Title: _____

Address _____

Name and Title: _____

Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: Robert R. Gardner

Address: 14106 Marden Ct

Odeessa, FL 33556

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Messengers of Hope Mission

Address: 14106 Marden Ct

Odeessa FL 33556

14 SEP -8 AM 7:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

Robert R. Gardner

Required Signature of Registered Agent

8/15/17

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.

Robert R. Gardner

Required Signature of Incorporator

8/15/17

Date