

N/14000010859

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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(Business Entity Name)

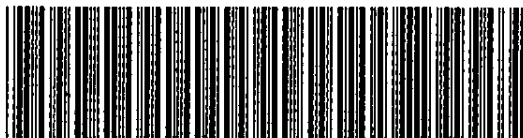
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

11/26/14

## COVER LETTER

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

SUBJECT: **GREAT WOMEN 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: **EVANGELIST JULIA MAE HODGE**

Name (Printed or typed)

**2100<sup>NW</sup> FOURTH COURT (NW)**

Address

**POMPANO BEACH, FL. 33069**

City, State & Zip

**954-984-0580**

Daytime Telephone number

**GreatWomenMission114@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)

**ARTICLE I NAME**

The name of the corporation shall be: GREAT WOMEN MISSION, INC

**ARTICLE II PRINCIPAL OFFICE**

Principal street address:

2100 N.W.FOURTH COURT

POMPANO BEACH

FLORIDA 33069

Mailing address, if different is:

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: To engage preteen, teenage and young adult women  
in their processes of social, educational, economic and spiritual change  
in order to achieve their highest life potential.

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

By election and appointments

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Julia Mae Hodge, President

Address: 2100 4th Court (N.W.)  
Pompano Beach  
Florida 33069

Name and Title: Beatrice Fullwood, Director

Address: 2300 N.W. 12th Terrace  
Pompano Beach  
Florida 33069

Name and Title: Floyd Dorsey, Director

Address: 6581 N.W. 16th Place  
Sunrise, Florida 333313

Name and Title: Mrs. Rozenia Brown Lee, Treasurer

Address: 2461 N.W. 13th Street  
Pompano Beach,  
Florida 33069

Name and Title: Ms. Deborah Dorsey, Secretary

Address: 2931 N.E. 8th Street  
Pompano Beach, Florida 33064

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

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: Dr. Marlegrecy N'Ovec, Ed D.

Address: 1903 Bermuda Circle, C2  
coconut Creek, Florida 33066

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Evangelist Julia Mae Hodge

Address: 2100<sup>NW</sup> Fourth Court (N.W.)  
Pompano, Florida 33069

*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*

Marlegrecy N'Ovec, Ed. D.  
Required Signature of Registered Agent

November 19, 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.*

Julia M. Hodge  
Required Signature of Incorporator

November 19, 2014

Date

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