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SECRETARY OF STATE
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2-6-15 B

COVER LETTER

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

SUBJECT: Matrix Community Dutiench Center Inc.

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: Name (Printed or typed)

37 N. 9th St

DeFunial Spas, FL 32433

350 - 301 - 8100

Daytime Telephone number

Hematrix a matrix coc. oro

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)
The name of the corporation shall be: Matrix Community Dutreach Center Inc.
ARTICLE II PRINCIPAL OFFICE
Principal street address: Mailing address, if different is: 37 N 9th St 37 N 9th St
DeFuniak Spgs, FL 32433 DeFuniak Spgs, FL 32433
ARTICLE III PURPOSE The purpose for which the corporation is organized is: to meet the physical, emotional and spiritual needs of the community through the efforts of networking with churches, organizations and individuals who seek to glorify God and make his name known.
ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected and appointed: APPROVED TO MANNER OF ELECTION The manner in which the directors are elected and appointed:
Fig. Tourse Pro Dichard Muscoul V Press
Name and Title: LIC Joyner-tres. Name and Title: Kichard Murray - V Hes & Address: 465 W Spruce St Secretary
Detunial Spas, FL Detunial Spas, FL 32435
Name and Title: Bethany Joyner-Treasurer Name and Title: Candy Nowling - Director
Address 1619 Walton Rd Address: 1801 Cay Burgess Loop
32433 Jehmal Spg. FL 32435
Name and Title: Doyle E Joyce Name and Title:
Address 815 Lakeview Drive Address:
Letunial Spas FL
<u>3a433</u>

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. Bo	x NOT acceptable) of the registered agent	tis:
Name: Cardy Not	<u> pnila</u>	
	gess Loop ogs, FL 3a435	
ARTICLE VII INCORPORATOR The name and address of the Incorporator is:		
Name: Dovle E	Jovner	
	iew Dr	
DeFunial ?	Spos	
Having been named as registered agent to accept the appearance of	eept service of process for the above sta opointment as registered agent and agree	ted corporation at the place designated in this to act in this capacity
		1/29/15
I submit this document and affirm that the fact	()	Date onv false information submitted in a document
to the Department of Style constitutes a third de	rgree felony as provided for in s.817.155,	F.S.
Karle G. Joynes		_1/29/15
Doyle E Joyner	ture of Incorporator	/ Date ·