

NIS 8000002062

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☒ WAIT

☐ MAIL

(Business Entity Name)

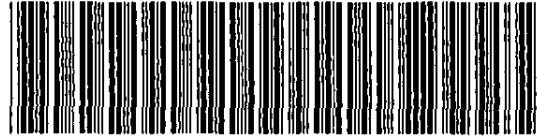
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15 FEB 27 AM 11:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED

COVER LETTER

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

SUBJECT: Grand Ridge House of Prayer In Jesus Name . 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: A Danny Ray Cloud
Name (Printed or typed)

8000 Church ST.
Address

Snooks, FL 32460
City, State & Zip

850-693-3822
Daytime Telephone number

alscherer52@embargo.net.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: Grand Ridge House of Prayer In Jesus Name, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address:

Mailing address, if different is:

6902 Brushy Pond Rd.

Grand Ridge, Fl.

32442

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Church.

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

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Danny Ray Cloud Pastor Name and Title: WALTER J. WARNER SR. Teacher

Address: 8000 Church St. Address: 6906 Florida St.
Sneds, Fl. Grand Ridge, Fl.
32460 32442

Name and Title: Rita Cloud TREA. Name and Title: _____

Address: 8000 Church St. Address: _____
Sneds, Fl.
32460

Name and Title: Ada Scherer Sec. Name and Title: _____

Address: 5506 Friendship Church Rd. Address: _____
Malone, Fl.
32445

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED

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: Danny Ray Cloud

Address: 5000 Church St.

Sarasota, Fl. 32460

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: LOVE OF THE CROSS

Address: 6902 Bruohy Pond Rd.

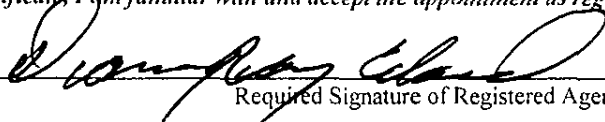
Grand Ridge, Fl. 32442

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TALLAHASSEE FLORIDA

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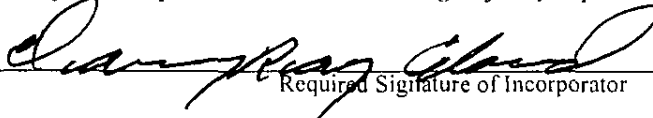
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity


Required Signature of Registered Agent

FEB. 27, 2015

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.


Required Signature of Incorporator

FEB. 27, 2015

Date