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COVER LETTER

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

SUBJECT: **JESUS COMPASSION MINISTRIES II, 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: **Sadie Connor**
Name (Printed or typed)

1401 So. State Road 7, #7
Address

North Lauderdale, Fl. 33068
City, State & Zip

954-975-3234
Daytime Telephone number

pmbent@aol.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: Jesus Compassion Ministries II, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address:

1401 So. State Road 7, #7

North Lauderdale,

Fl. 33068

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Church: Religious Services and Bible Studies

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

Directors are appointed by President

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Sadie Connor, President

Address: 323 SW 76 Terr

North Lauderdale,

Fl 33068

Name and Title: Joan Lovelace, T

Address: 1401 So. State Road 7, #7

North Lauderdale,

Fl 33068

Name and Title: Pauline Gowdy-Bent, Sec

Address: 1104 SW 49 Terr

Margate,

Fl 33068

Name and Title: _____

Address: _____

Name and Title: William Kirkland, VP

Address: 323 SW 76 Terr

North Lauderdale

Fl 33068

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: Sadie Connor

Address: 323 SW 76 Terr
North Lauderdale, Fl. 33068

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Sadie Connor

Address: 323 SW 76 Terr
North Lauderdale, Fl. 33068

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

2-24-2015

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

2-24-2015

Date