

N 160000001648

(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



400280666584

01/11/16--01030--007 **70.00

FILED

16 FEB 10 PM 3:57

CLERK OF STATE
TALLAHASSEE, FLORIDA

2/18/16

COVER LETTER

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

SUBJECT: Mount Zion African Methodist Episcopal Church Inc., Orange City, Florida
(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: Mount Zion African Episcopal Church Inc., Orange City, FL
Name (Printed or typed)

450 South Holly Avenue Post Office Box 1534
Address

Orange City, Florida 32714
City, State & Zip

(386) 559-1042
Daytime Telephone number

afj1@yahoo.com
E-mail address: (to be used for future annual report notification)

NOTE: Please provide the original and one copy of the articles.

FILED
16 FEB 10 PM 3:57
DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

FILED
16 FEB 10 PM 3:58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

January 22, 2016

MOUNT ZION AFRICAN EPISCOPAL CHURCH INC ORANGE CITY FL
450 SOUTH HOLLY AVENUE
ORANGE CITY, FL 32774

SUBJECT: MOUNT ZION AFRICAN METHODIST EPISCOPAL CHURCH INC.,
ORANGE CITY, FLORIDA
Ref. Number: W16000004708

We have received your document for **MOUNT ZION AFRICAN METHODIST EPISCOPAL CHURCH INC., ORANGE CITY, FLORIDA** and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The title(s) in the officer/director field(s) is/are not acceptable. Please refer to the following link for acceptable officer/director title information.
<http://www.sunbiz.org/titledef.html>.

Section 617.0202(d), Florida Statutes, requires the manner in which directors are elected or appointed be contained in the articles of incorporation or a statement that the method of election of directors is as stated in the bylaws.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Claretha Golden
Regulatory Specialist II
New Filing Section

Letter Number: 816A00001494

RECEIVED
16 FEB 10 PM 12:35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION
In compliance with Chapter 617, F.S., (Not for Profit)

ARTICLE I NAME

The name of the corporation shall be: Mount Zion African Methodist Episcopal Church Inc., Orange City, Florida

FILED

16 FEB 10 PM 3:58

ARTICLE II PRINCIPAL OFFICE

Principal street address:
450 South Holly Avenue

Orange City, Florida 32763

Mailing address, if different is:
Post Office Box 1534

Orange City, Florida 32774

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To make available God's biblical principles, spread Christ's liberating gospel
and provide continuing programs which will enhance the entire social development of all people.

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

*The manner of election shall be as the by-laws of ~~See attached sheet~~
the A.M.E. Church require.*

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Rev. Cornelius S. Golden, Pastor

Address: 1211 Old Highway 17
Crescent City, Florida 32112

Name and Title: Bro. Vernon Stafford, Treasurer

Address: 350 S. Orange Avenue
Orange City, Florida 32763

Name and Title: Sis. Betty Durant, Secretary

Address: 220 S. Orange Avenue
Orange City, Florida 32763

Name and Title: Sis. Annie Johnson, ~~Administrative Ass~~

Address: 310 Glen Club Drive
DeBary, Florida 32713

Director

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Article IV MANNER OF ELECTION The manner in which the directors are elected and appointed:
The Pastor shall nominate twice the number needed and give a ten day notice from the pulpit that an election for trustees will be held on a particular day in a particular place. All members in good standing shall be eligible to vote.

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: Sis. Annie Johnson
Address: 310 Glen Club Drive
DeBary, FL 32713

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Rev. Dr. Cornelius S. Golden
Address: 1211 Old Highway 17
Crescent City, Florida 32112

FILED
16 FEB 10 PM 3:58
DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

Annie Johnson
Required Signature of Registered Agent

1/6/2016
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.

Dr. C. S. Golden
Required Signature of Incorporator

1/6/2016
Date