

# N/600001/399

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

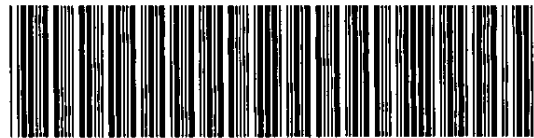
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

V HERRING  
NOV 30 2016

## COVER LETTER

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

SUBJECT: GRACEPOINT CHURCH, 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: GRACEPOINT CHURCH, INC.  
Name (Printed or typed)

P.O.Box 10413

Address

Daytona Beach, Florida 32120

City, State & Zip

386.333.2782

Daytime Telephone number

gracepointchurch31@gmail.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: GRACEPOINT CHURCH, INC

**ARTICLE II PRINCIPAL OFFICE**

Principal street address:  
955 South Orange Ave

Port Orange, Florida 32129

Mailing address, if different is  
P.O. Box 10413

Daytona Beach, Florida 32120

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TALLAHASSEE, FLORIDA

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: \_\_\_\_\_

To provide worship experiences for our membership and the greater Christian Community, that celebrate the Lordship of Jesus  
and encourage the believers.

To introduce our Savior and Lord Jesus Christ to as many persons as possible through as many methods as feasible, for the goal  
of leading them to salvation in Jesus Christ.

To minister to the physical needs of both church members and the citizens.

**ARTICLE IV MANNER OF ELECTION**

The manner in which the directors are elected and appointed: Shall be appointed

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

Name and Title: Barry Powell, President

Address: 904 Maley Street  
Daytona Beach, Fl. 32114

Name and Title: Chiko Powell, V. President

Address: 904 Maley Street  
Daytona Beach, Florida 32114

Name and Title: Booker T. Waites, CFO

Address: 108 Tiff Blue Dr  
Holly Hill, Florida 32113

Name and Title: Laura Howard, Finance Secretary

Address: H25 Bragdon Rd.  
Palm Coast, Florida 32125

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

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

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

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

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

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

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

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

\_\_\_\_\_

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TALLAHASSEE, FLORIDA

**ARTICLE VI REGISTERED AGENT**

The **name and Florida street address** (P.O. Box NOT acceptable) of the registered agent is:

Name: Chiko Powell

Address: 904 Maley Street

Daytona Beach, Fl. 32114

**ARTICLE VII INCORPORATOR**

The **name and address** of the Incorporator is:

Name: Barry Powell

Address: 904 Maley Street

Daytona Beach, Fl.

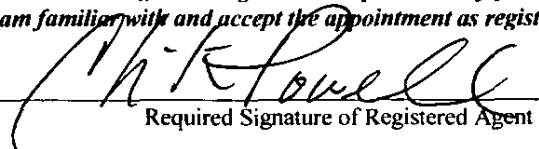
**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: 11/23/16 (OPTIONAL)

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

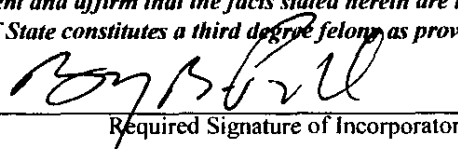
*Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity*

  
Required Signature of Registered Agent

11/23/16

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

11/23/16

Date