

N17000004765

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

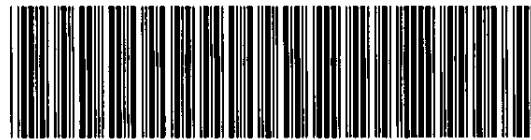
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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04/27/17--01019--004 **70.00

FILED
17 MAY -4 AM 7:51
CORPORATION DIVISION
TALLAHASSEE, FLORIDA

W17-036594

T. BURCH
MAY 5 2017

COVER LETTER

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

SUBJECT: GOD ANSWERS PRAYERS - Emmanuel, 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: SAMS, BRANDON J.
Name (Printed or typed)

13470 SE 101 TERRACE
Address

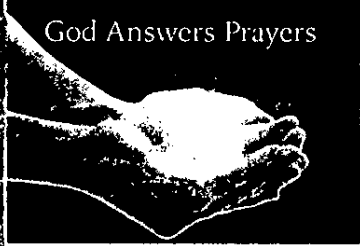
Belleview, FL 34420
City, State & Zip

352-288-2508
Daytime Telephone number

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

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

God Answers Prayers



God Answers Prayers, Inc.

*More Than Just A Place
To Live, A Place To Call
Home!*

**GOD ANSWERS PRAYERS
EMMANUEL, INC.**

13470 SE 101 Terrace
Belleview, Florida 34420

(P) 352-288-2508

(F) 352-288-2509

Lic# AL12482

godanswersprayersalf@gmail.com

www.godanswersprayersalf.com

April 24, 2017

RE: Converting for profit into non-profit

Document Number: P13000086287

Company Name: God Answers Prayers-Emmanuel, Inc.

Dear Ladies and Gentlemen:

Our company originally filed as a for profit corporation, however we wish to operate as a non-profit. Once accepted as a non-profit we will be filing the necessary dissolution as a profit corporation. We would like to keep our same name as a non-profit and we verify that we will not be using the name for profit purposes.

Thank you for your cooperation in this matter, and should you have any questions in regards to this application please contact my administrator, Cheryl Applegate at 352-288-2508.

Best Regards,

Brandon J. Sams

President



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 28, 2017

BRANDON SAMS
13470 S.E. 101 TERR.
BELLEVIEW, FL 34420

SUBJECT: GOD ANSWERS PRAYERS - EMMANUEL, INC.
Ref. Number: W17000036594

We have received your document for GOD ANSWERS PRAYERS - EMMANUEL, INC. 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 existing PROFIT must be Dissolved before the NONPROFIT can be filed. Please contact our Amendment Section (850-245-6050) for the appropriate Dissolution Application. Once the Dissolution is completely successful, please return a copy of this Rejection Letter to our office to indicate that we can proceed with this new NONPROFIT filing.

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

Thomas Chang
Regulatory Specialist II
New Filing Section

Letter Number: 317A00008338

PI3-86247

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

ARTICLE I NAME

The name of the corporation shall be: GOD ANSWERS PRAYERS - EMMANUEL, INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address:

13470 SE 101 Terrace
Belleview, FL 34420

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Assisted Living Facility

FILED
17 MAY -4 AM 7:51
CLERK OF THE CIRCUIT COURT
IN AND FOR THE COUNTY OF
DADE, FLORIDA

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

Outlined in Bylaws

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: BEANDON J. SAMS ^{President} Name and Title: _____

Address: 13470 SE 101 Terrace Address: _____
Belleview, FL 34420

Name and Title: Sheila Everett ^{Treasurer} Name and Title: _____

Address: 13547 SE 167th Lane Address: _____
Weirsdale, FL 32195

Name and Title: Cheryl Applegate ^{Secretary} Name and Title: _____

Address: 13470 SE 100th Ave. Address: _____
Belleview FL
34420

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: BRANDON J. SAMS

Address: 13470 SE 101 Terrace
Belleview FL 34420

FILED
17 MAY -4 AM 7:51
STATE OF FLORIDA
TALLAHASSEE

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: BRANDON J. SAMS

Address: 13470 SE 101 Terrace
Belleview, FL 34420

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 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

BSams
Required Signature of Registered Agent

4-24-17
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.

BSams
Required Signature of Incorporator

4-24-17
Date