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(Business Entity Name)				
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W17-53391





FLORIDA DEPARTMENT OF STATE Division of Corporations

July 5, 2017

DR. EDWARD HEARNS 2615 SE 15TH ST. GAINESVILLE, FL 32641

SUBJECT: ADULLAM BIBLE COLLEGE

Ref. Number: W17000055391

We have received your document for ADULLAM BIBLE COLLEGE and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Entities may file using only the entity's name. Please delete any reference to the "doing business as name" in your document. If you wish to register your fictitious name, you may do so by filing an application and submitting the appropriate fees to this office.

The name must contain a word that will clearly indicate that it is a corporation. This word may be: CORPORATION, CORP., INCORPORATED, or INC. Sections 617.0401(1)(a) and 617.1506(1), Florida Statutes, prohibits the use of the word COMPANY or CO. in the name of a non-profit corporation.

Please return 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.

DANIEL L O'KEEFE Regulatory Specialist II

Letter Number: 417A000135572

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COVER LETTER

Department of State
Division of Corporations
PrOrBox 6327
Tallahassee, FL 32314

SUBJECT:	Adullar	n Bible	College	
	(PROPOS	ED CORPORATE'N	AME - MUST INCLUDE SU	FFIX)

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,

ſ.

Certified Copy & Certificate

ADDITIONAL COPY REQUIRED

FROM: Dr. Edward Hearns

2615 SE 15th St.

Gaine Sville, Fla 32641

(731) 845 - 6388 Daytime Telephone number

E-mail address: (to be used for fature 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)

The name of the	NAME e corporation shall be: Adulam Bible	College, Inc
ARTICLEII	PRINCIPAL OFFICE	
	Principal street address: 36/5 SE 15H SH	Mailing address, if different is:
	Gainsville, Fla 32641	
ARTICLE III The purpose for	purpose or which the corporation is organized is: Adullam B, iliated with any religious organize a by ABC are designed to in the work of the ministry.	ble College is a religious institution ation. The Bible Studies degrees equip Students to follow the
andar	MANNER OF ELECTION The manner in which the directions are appointed for yer terms are clearly among the members initial officers and or directors	
Name and Title	Dr. Madeline Mays, Chair Name and Title: 414 Marine Loop Address:	Antanic Braham, Secretary 6 Country Side Dr
Audiess	Henderson, TN. 38.340	Jackson, TH 38305
Name and Title	Dwight Hunt, V-CharName and Title:	Kelvin Mercer
Address	_2.34 Stratford Lane Address: Jackson, TN. 38305	Pinson, TN 38366
Name and Title		
Address	Pontiac, Mich 48341	
		. ::
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Name and Title:	Name and Title:	-
Address	Address:	
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Name and Title:	Name and Title:	
Address	Address:	
	. Box NOT acceptable) of the registered agent is:	
Name: Dook+le M	Cillie King	
Address: <u>3615 SE /</u>	5 \$ 5+ , F/a 3264/	
<u>Gainesrille</u>	, F/a 32641	
ARTICLE VII INCORPORATOR		
The <u>name and address</u> of the incorporator Name: Dr. Edward	•	
<u> Gainesuill</u>	1545f THE 32641	
ARTICLE VIII EFFECTIVE DATE:		
	g: (OPTIONAL) st be specific and cannot be more than five days prior or 90 days after the filing	.)
Note: If the date inserted in this block doe document's effective date on the Departme	s not meet the applicable statutory filing requirements, this date will not be listed as t nt of State's records.	the
Having been named as registered agent to certificate, I am familiar with and accept to	accept service of process for the above stated corporation at the place designated to appointment as registered agent and agree to act in this capacity	l in this
+ Apostle Utilli K Required Signat	ure of Registered Agent Date	
I submit this document and affirm that the	/ facts stated herein are true. I am aware that any false information submitted in a do rd degree felony as provided for in s:817.155, F.S.	cument
	gnature of Incorporator Date	7
Required S	gnature of Incorporator Date	