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D O'KEEFE JUL 1 9 2018



FLORIDA DEPARTMENT OF STATE Division of Corporations

June 27, 2018

MARY J. MOORE 4986 TILLIE LANE TALLAHASSEE, FL 32305

SUBJECT: CENTENARY AFRICAN METHODIST EPISCOPAL CHURCHI

Ref. Number: W18000048643

We have received your document for CENTENARY AFRICAN METHODIST EPISCOPAL CHURCH and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

THE ENTITY NAME IN ARTICLE 1 MUST MATCH THE ENTITY NAME ON THE COVER LETTER.

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: 118A00013392

18 JUL 16 PH 12: 21
SECRETARY OF STATE
TALLAHASSEE, FLORID

COVER LETTER

Division of Corporations
P. O. Box 6327
Tallahassee. FL 32314

Centenary AME Church; Inc.

SUBJECT: Centenary American Methodist Episcopul Church; (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Department of State

Enclosed is an original and one (1) copy of the Articles of Incorporation and a check for :

S70.00 S78.75 S78.75 S87.50
Filing Fee Filing Fee & Filing Fee & Filing Fee, Certificate of Status

ADDITIONAL COPY REQUIRED

FROM: MWYY J, Moore
Name (Printed or typed)

11636 Tillie Lane
Address

Taliahassee Fl 32305
City, State & Zip

850 - 942 - 0192

Daytime Telephone number

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: | Centenary A. | ME Church I, | <u>1</u> 2, | | | |
|--|----------------------------|-----------------------------------|--|--|--|--|
| ARTICLE II PRINCIPAL OFFICE | _ | , | | | | |
| Principal street address | ss: Herville Rd. | Mailing address, if different is: | | | | |
| Tailahassee F | 7 32304 | Tallahassee | F1 32317 | | | |
| ARTICLE III PURPOSE The purpose for which the corporation TO YECEIVE A GIFT TO YECEIVE This G Diganization. ARTICLE IV MANNER OF ELEC hy laws and clock | TION The manner in which t | nty 3Ch001 Bow. | rd. In order be a non Profin nted: By the | | | |
| Name and Title: | AND/OR DIRECTORS | d Wiston | | | | |
| | | | | | | |
| Address | Address: | | | | | |
| | | *** | | | | |
| _ | | | | | | |
| Name and Title: | Name an | d Title: | | | | |
| Address | Address | · | | | | |
| | | | —————————————————————————————————————— | | | |
| | | | ALLANDO | | | |
| Name and Title: | Name as | d Title: | | | | |
| Address | Address | | SEE PR | | | |
| | <u> </u> | | PHI2 | | | |
| | • | | : 21 DA 1: 21 | | | |

| Address | 4986 TI | Hie Lane | Address: | : Frances L, 324 N. Marti | n Luther Ki | 'ng 1 |
|---|--|--|-------------------------------|--|---|-------------|
| | | ee Fl 22305 | | Tallahassee | | |
| - -Name and Title | Margiek. | Parruthers, | Name and Title | · | | |
| | | | | | | |
| - | Tallaha. | 55CC, FL 32 | <u>3</u> 09 | | | |
| ARTICLE VI The name and E | 4.4 | ess (P.O. Box NOT acc | | istered agent is: | | |
| Name: | | J. MOOPE | | | | |
| Address: | | THIC LONG | | | SEC PALL A | |
| | 1 willwha | ssee F/ 323 | 305 | | | |
| | INCORPORATO | | | | JUL 16 PH 12: 21 RELARY OF STATE LAHASSEE; ELORID | |
| Name | Mory. | T. Moore | | | 20 A | |
| Address: | _ | T. Moore La | | | IDA. | ÷ |
| | | hassee, FL | 3,309 | | | |
| ARTICLE VIII Effective date, i (If an effective | f other than the dat date is listed, the | ATE: e of tiling:5/3/ date must be specific | 2018 and cannot be me | (OPTIONAL) are than five days prior o | r 90 days after the | filing |
| Note: If the dat document's effe | te inserted in this bloctive date on the D | lock does not meet the repartment of State's re | applicable statutor cords. | y tiling requirements, this | date will not be list | ed as t |
| certificate, I am | familiar with and | accept the appointmen | t as registered agei | he above stated corporation at and agree to act in this c | n at the place designacity | gnatec |
| . Ma | Require | of Register of Register | red Agent | | 5-31-18 Date | |
| | annous and officer | that the facts stated by | erein are true. Lan | i aware that any false info | rmation submitted i | in a do |