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## COVER LETTER

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

SUBJECT: St Phillip Primitive Baptist 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: James Randolph  
Name (Printed or typed)

1100 Dade St  
Address

Tallahassee, Florida 32304  
City, State & Zip

850-570-8987  
Daytime Telephone number

bclayton@aol.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: St Phillip's Primitive Baptist Church, Inc

## ARTICLE II PRINCIPAL OFFICE

Principal street address:

13350 Old Centerville Rd  
Tallahassee, Florida 32309

Mailing address, if different is:

1100 Dade St  
Tallahassee, Florida 32304

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

A primitive Baptist church.

## ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected and appointed: Elects

directors by members of church

## ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: James Randolph (Treasurer)

Address: 1100 Dade St

Tallahassee, Florida  
32304

Name and Title: Ecklie Randolph (Deacon)

Address: 6714 Preston St

Tallahassee, Florida  
32304

Name and Title: Barbara Clayton (Secretary)

Address: 1325 Elsona Rd

Thomasville, Georgia 31792

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CLERK OF SUPERIOR COURT  
JULIA A. HARRIS

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: James Randolph  
 Address: 1100 Dack St  
Tallahassee, Florida 32304

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: James Randolph  
 Address: 1100 Dack St  
Tallahassee, Florida 32304

**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: 8/8/2018 (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*

James Randolph  
 Required Signature of Registered Agent

8/8/18  
 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.*

James Randolph  
 Required Signature of Incorporator

8/8/18  
 Date