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## **COVER LETTER**

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

SUBJECT: Mt. Olive A. M.E. Church of Bealsville (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is an original a	nd one (1) copy of the Ar	ticles of Incorporation	and a check for:
<b>5</b> ••• ••	<b>D</b> ••••	Descri	D 202 22
\$70.00	\$78.75	\$78.75	\$87.50

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ADDITIONAL COPY REQUIRED

FROM: Row Jamy D Neys Sr.
Name (Printed or typed)

2448 Mary Tewest Circle

Winfer Haven In 33881
City, State & Zip

863-7/2 -0669

Daytime Telephone number

E-mail address: (to be used for future annual report notification)

Re: Letter Number 619A00006750 Also Enclosed a Copy 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: Mt. Olive A.M.E. Church of Bealsville IN
ARTICLE II PRINCIPAL OFFICE
Principal <u>street</u> address:  Mailing address, if different is:  5100 Horton Rd (Bealsville)  Same as Principle
Plant City, FL 33567
ARTICLE III PURPOSE  The purpose for which the corporation is organized is: for a Religious place of worship
in the A.M.E. Church.
· · · · · · · · · · · · · · · · · · ·
ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected and appointed: Directors  ONE nominated and elected by the local Church Body.  ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS
Name and Title: Wanda Berry - Bookkeeper Name and Title: Mary A. Sherman - Trustee  Address 1033 Breeze way Ct. Address: Hoo5 Horton Rd
Brandon, Fl 33511 Plant City, Fl 33567
Name and Tide Charastopher Lovett - Officer Name and Title: Donald Brown - Trustee
Name and Tito (Threstopher Lovett - Officer Name and Title: Donald Brown - Trustee  Address: 52344 Horton Rd Address: 5225 Clarence Gordon JR. Rd.  RD Flacet City, FL 33567  Plant City, FL 33567
Name and Title: Carl H. Berry - Trustee Name and Title:
Address 1033 Breeze way Ct. Address:
Brandon, FL 33511

Name and Title	·	Name and Title:	·**·
Address	<del></del>	Address:	
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Name and Title		Name and Title:	
Address		Address:	
	<u> </u>		
ARTICLE VI	REGISTERED AGENT		
The <u>name and I</u>	Horida street address (P.O. Bo	x NOT acceptable) of the registered agent	is:
Name:	Rew. Larry 2448 Mary. Winter Haven	D. Reys, Sr.	
Address:	2448 Mary.	Jewett Circle	
	Winter Haven	, FL 33881	
	INCORPORATOR address of the Incorporator is:		
Name:	Rev. Larry D.	Keus, Sc.	
Address:	Rw. Larry D. 2448 Mary J	ewest Circle	
71441 655.	Winter Haven,	F1 22.881	
	,	0 00 00 1	
Effective date, i	<u>EFFECTIVE DATE:</u> f other than the date of filing: _		IONAL)
(If an effective	date is listed, the date must be	e specific and cannot be more than five	days prior or 90 days after the filing.)
Note: If the dat	a incerted in this black done no	t meet the applicable statutory filing requi	iramanta this data will not be listed as the
document's effe	ctive date on the Department of	State's records.	rements, this date will not be fisted as the
certificate, I am	med as registered agent to acc familiar with and accept the ap	cept service of process for the above state pointment as registered agent and agree t	ed corporation at the place designated is to act in this capacity
$\circ$	w Do Kour (	7	10:012.2019
Kon Y.	Required Signature of	of Registered Agent	Date Date
Ker La			>>> <b>₹</b>
I submit this doc	cument and affirm that the fact	s stated herein are true. I am aware that a	
I submit this doc	cument and affirm that the fact	s stated herein are true. I am aware that a gree felony as provided for in s.817.155, i	