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(Requestor's Name)

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(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

\_\_\_\_\_  
(Business Entity Name)

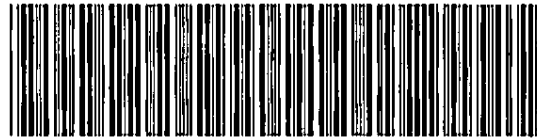
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FLORIDA DEPARTMENT OF STATE  
Division of Corporations

July 11, 2019

TANGELA D. WALDEN  
556 SW UNDALLO RD  
PORT ST. LUCIE, FL 34953

SUBJECT: THE GATHERING OF THE FORGOTTEN ONES, INC.  
Ref. Number: W19000063416

We have received your document for THE GATHERING OF THE FORGOTTEN ONES, 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 title(s) in the officer/director field(s) is/are not acceptable. Please refer to the following link for acceptable officer/director title information.  
<http://dos.myflorida.com/sunbiz/search/guides/corporation-records/title-abbreviations/>

Please return the corrected original and one copy of 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.

Tyrone Scott  
Regulatory Specialist II  
New Filings Section

Letter Number: 219A00014000

## COVER LETTER

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

**SUBJECT:** THE GATHERING OF THE FORGOTTEN ONES  
\_\_\_\_\_  
(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:** TANGELA D. WALDEN  
\_\_\_\_\_  
Name (Printed or typed)

556 SW UNDALLO RD  
\_\_\_\_\_  
Address

PORT ST. LUCIE, FL 34953  
\_\_\_\_\_  
City, State & Zip

772-529-0391  
\_\_\_\_\_  
Daytime Telephone number

TANGELAWALDEN@GMAIL.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: THE GATHERING OF THE FORGOTTEN ONES, INC.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address:  
556 UNDALLO RD. PORT ST LUCIE, FL 34953

Mailing address, if different is:

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: to cultivating law enforcement public servants through the governance of christian principles through teaching, preaching, work shops, writing books, humanitarian outreach, and counseling, which will enable them to serve with accountability, professionalism, and a heart towards God.

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

in bylaws

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: TANGELA D. WALDEN, PRESIDENT

Address: 556 SW UNDALLO RD  
PORT ST LUCIE, FL 34953

Name and Title: ALEXANDER L. WALDEN, SR VP

Address: 5331 CHALKSTONE WAY  
FAIRFAX, VA 22030

Name and Title: VALERIE SHEPHARD, TC

Address: 1055 NELSON ST.  
JACKSONVILLE, FL 32205

Name and Title: STACEY EDENS, D

Address: 1900 ESTRELLA COURT  
PALM BEACH GARDENS, FL 33410

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_ Address: \_\_\_\_\_

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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: Tangela D. Walden

Address: 556 SW Undallo Rd.

Port St. Lucie, Fl. 34953

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Tangela D. Walden

Address: 556 SW Undallo Rd

Port St Lucie, Fl 34953

**ARTICLE VIII EFFECTIVE DATE:** 06/23/19

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*

Tangela D. Walden  
Required Signature of Registered Agent

6.23.19  
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.*

Tangela D. Walden  
Required Signature of Incorporator

6.23.19  
Date