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(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

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SECRETARY OF STATE ALLAHASSEE, FLORIDA

D O'KEEFE

OCT 01 2019

COVER LETTER

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

SUBJECT: The Awakening Church 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 **378.75**

Filing Fee & Certificate of Status

\$78.75 Filing Fee

& Certified Copy

\$87.50

Filing Fee. Certified Copy

& Certificate

ADDITIONAL COPY REQUIRED

FROM: Katie Jenkins
Name (Printed or typed)

2355 W. Michigan Ave B-16

Pensacola FL 32526
City. State & Zip

321-987 - 1850

Daytime Telephone number

Kutie & Katie Jen Kins on line. (om)
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)

The name of the corporation shall be: The Awakening C	hurch INC
ARTICLE II PRINCIPAL OFFICE	
Principal <u>street</u> address: 2355 W. Michigan Ave B-16	Mailing address, if different is: 2355 W. Michigan Ave B-16
Pensacola, FL 32526	
ARTICLE III PURPOSE The purpose for which the corporation is organized is: This a cre Come together a share our be	
We have weekly services we do Faith Base Church group	o outreach in our Community
ARTICIFIV MANNER OF FLECTION TO	8 PH 1: 19
They are assigned by Pastor.	
Name and Title: Maurice L. Hargranes Name and Title: Maurice L. Hargranes Name and Title: Maurice L. Hargranes	ide: Bennie JR. Jenkins Director
Address 1230 Langley Ave Address: Pensacola FL 32504	Pensacola FC 32526
Name and Title: <u>Sixela Jaylor Ruffin Director</u> Name and Title: <u>Sixela Jaylor Ruffin Director</u> Name and Title: <u>Address</u> Address Address:	
Mobile, AL. 36608 Name and Title: Pastor: Katie Jenkins Name and Title	Pensacola, Fl 32506
	Persacola 2l 32526 Persacola, Fl. 32571

Name and Title:		Name and Title:		_	
Address		Address:		_	
-					
-					
Name and Title:		Name and Title:			
Address			-		
-					
_					
ARTICLE VI The name and F	REGISTERED AGENT lorida street address (P.O. Box NOT acce	ptable) of the registered agent in			
Name:	Katic Denise Jenk				
Address:	2355 W. Michigan	Ave B-16		<u>.</u>	
	Pensacola, FL 32	526	CLLAH CLAH SCKE	,)	
ADTICLE LIE	·	— —	TARK MASSAN	; =	i de la companie de l
ARTICLE VII The name and ac	INCORPORATOR Idress of the Incorporator is:		<u> </u>		¥] }
Name:	Katie Oenise Jen	lano	PIA:		
Address:	2355 W. Milliga	<u>n A</u> ve B-16	, Se. €	,	
	tensacola FL 3	32526			
Effective date, if	EFFECTIVE DATE:	2019 (OPTIONAL)	ior or 90 days after (the filing.))
Note: If the date	inserted in this block does not meet the app ive date on the Department of State's recor	plicable statutory filing requirements		-	
Having been nam certificate, I am fa	ned as registered agent to accept service of miliar with and accept the appointment as	f process for the above stated corpo registered agent and agree to act in t	ration at the place di this capacity	esignated	in this
Hatie	Hoquired Signature of Registered		91/03/2	019	
I submit this docum	ment and affirm that the facts stated hereio	a are true. I am aware that any falca	information submitte	d in a doc	ument
io ine Department	of State Constitutes a titura degree Jelony a.	s provided for in 8.817.155, F.S.	1201		
- Patu	Acquired Signature of Incorporate	prator	<u>U4 03 </u>	207	9
/	U		, Date		