N20000000946

(Re	questor's Name)	
(Ad	dress)	_
(Ad	dress)	
(Ćit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
_		_
	siness Entity Nar	ma)
(50	Siliess Ellilly Ival	ne,
/Do	cument Number)	
(50	coment (vamber)	
Certified Copies	Cortificato	s of Status
Certified Copies	_ Certificate:	s or Status
Special Instructions to	Filing Officer:	

Office Use Only



500338293475

13/39/19 #0043--915 **78.75

COVER LETTER

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

SUBJECT: Tabernacle o	f Margaretta Enlightened Churc (PROPOSED CORPO	h of God, Inc. RATE NAME – <u>MUST IN</u> C	CLUDE SÜFFIX)
Enclosed is an original a	ind one (1) copy of the Artic	eles 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 CO	PY REQUIRED
FROM:	Pastor Joshua L. Daniels		_
	Nam 921 South East 20th Street	e (Printed or typed)	
	Gainesville FL 32641	Address	-

Daytime Telephone number

Chiqhend@prodigy.net

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

NOTE: Please provide the original and one copy of the articles.

City, State & Zip

2020 JAN 29 AM 7: 39 SECRETARY OF STAT

ARTICLES OF INCORPORATION

In compliance with Chapter 617, F.S., (Not for Profit)

ARTICLE I The name of	NAME the corporation shall be:	garetta Enlightene	d Church of God, Inc.		
<u>ARTICLE II</u>	PRINCIPAL OFFICE				
993	Principal street address: 9934 County Road 139 Glen St. Mary F1, 32040 Mailing address, if differe 921 South East 20th Street Gainesville F1, 32641		Mailing address, if different is: 921 South East 20th Street		
Gle			inesville FL 32641		
The purpose	I <u>PURPOSE</u> for which the corporation is organized is: R ". is to serve ad to promote the Christian Fa	RELIGIOUS. The	e Corporation hereinafter sometimes refuseople in the Christian Faith, to conduct	erred to as	
<u> </u>	care for and meet the needs of people within	n and outside the	congregation, to extend the message and	d mission of	
the church a	nd winning souls for Christ.				
			·		
			Direc	etors shall be	ബവ
ARTICLE II	* MANNER OF ELECTION The man	mer in which the d	irectors are elected and appointed:	etors shall be	apj
			irectors are elected and appointed:	etors shall be	apj
ARTICLE V	INITIAL OFFICERS AND/OR DIREC	TORS		etors shall be	apj
ARTICLE V		TORS		etors shall be	apj
ARTICLE V	INITIAL OFFICERS AND/OR DIREC Joshua I. Daniels - President	<i>TORS</i> Name and Ti	Dorothy Ford - Director	etors shall be	ap
ARTICLE V Name and Ti Address	INITIAL OFFICERS AND/OR DIRECT IDENTIFICATION OF THE STATE OF THE STAT	TORS Name and Ti Address:	Dorothy Ford - Director 223 South 2nd Street McClenny FL 32083	-	a n
ARTICLE V Name and Ti Address Name and Ti	INITIAL OFFICERS AND/OR DIRECT IDENTIFICATION OF THE STATE OF THE STAT	Name and Ti Address: Name and Ti	Dorothy Ford - Director 223 South 2nd Street McClenny FL 32083	-	
ARTICLE V Name and Ti Address	tle: Joshua I. Daniels - President 921 South East 20th Street Gainesville FL 32641 tle: Ingrid C. Henderson - Vice President	TORS Name and Ti Address:	Dorothy Ford - Director 223 South 2nd Street McClenny FL 32083 Jimi L. Daniels - Vice Treasurer 4220 North West 128th Terrace Gainesville FL 32606	1 2020 JAN 25	COLUMN TO THE PARTY OF THE PART
ARTICLE V Name and Ti Address Name and Ti Address	tle: Joshua I. Daniels - President 921 South East 20th Street Gainesville FL 32641 tle: Ingrid C. Henderson - Vice President 921 South East 20th Street Gainesville FL 32641	TORS Name and Ti Address: Name and Ti Address:	Dorothy Ford - Director 223 South 2nd Street McClenny F1, 32083 Jimi L. Daniels - Vice Treasurer 4220 North West 128th Terrace Gainesville F1, 32606	A TOTAL SOUTH A SOUTH	eran ya
ARTICLE V Name and Ti Address Name and Ti	tle: Joshua I. Daniels - President 921 South East 20th Street Gainesville FL 32641 tle: 1921 South East 20th Street Gainesville FL 32641 Richard Williams - Traceurer	Name and Ti Address: Name and Ti Address: Name and Ti	Dorothy Ford - Director 223 South 2nd Street McClenny F1, 32083 Jimi L. Daniels - Vice Treasurer 4220 North West 128th Terrace Gainesville F1, 32606	지생기를 통화합	Control of the Contro

Name and Title:		Name and Title:			
Address' _		Address:			
-					
Name and Title:		Name and Title:			
Address		Address:			
-					
-					
	REGISTERED AGENT			~	
The <u>name and I</u>	Florida street address (P.O. Box NOT acc	ceptable) of the registered agent is:	e 는 기를	<u>1</u> 020	
Name:	Ingrid C. Henderson		一部	2020 JAN 2	
Address:	921 South East 20th Street		AAA	N 29	
	Gainesville FL 32641		ALLAHASSER	2	() () () () () () () () () ()
	INCORPORATOR address of the Incorporator is:		STATE E, FL	7: 39	C
Name:	Joshua L. Daniels				
Address:	921 South East 20th Street				
	Gainesville FL 32641				
Effective date, i	EFFECTIVE DATE: f other than the date of filing: date is listed, the date must be specific	9	90 days after	the fili	ng.)
	e inserted in this block does not meet the ective date on the Department of State's re	applicable statutory filing requirements, this decords.	late will not be	listed a	is the
Having been no certificate, I am	imed as registered agent to accept servic familiar with and accept the appointment	ve of process for the above stated corporation t as registered agent and agree to act in this cap	at the place d pacity	lesignat	ved in thi.
4	Required Signature of Register	ed Agent	Date		-
	cument and affirm that the facts stated her of State constitutes a third degree felony o	rein are true. I am aware that any false informa as provided for in s.817.155, F.S.	ation submitted	in a do	cument to
	Required Signature of Inc	orporator	Date		-

Required Signature of Incorporator

Title: Register Agent

Ingrid C. Henderson 921 South East 20th Street Gainesville, FL 32641

The following Incorporation, successors to the Board of Directors and it Officers shall be elected in accordance with the Church Bylaws.

ARTICLE X - BYLAWS

The Bylaws of the Corporations shall be adopted by the Board of Director and may be amended and changed from time to time by them.

ARTICLE XI - AMENDMENT

These Articles of Incorporation may be amended by action of the duly elected Board of Directors and in accordance with Florida Law.

ARTICLE XII - DISSOLUTION

No person, firm or Corporation shall ever receive any dividend or share in the income from the undertaking of this Not-For-Profit Corporation and upon dissolution of this Corporation all assets remaining after payment of the costs and expenses of such dissolution shall be distributed in a manner which qualifies for exemption under Section 501(c)(3) and 170(c) of the Internal Revenue Code of the United States of America, for a public purpose, and none of the assets shall be distributed to any Member, Officer or Director of this Corporation.

Joshua L., Daniels, President/Director

Ingrid C. Henderson, Vice President/Director

Richard Williams, Treasurer/Director

Jimi L. Daniels, Vice Treasurer/Director

STATE OF FLORIDA COUNTY OF ALACHUA BEFORE ME this day $_{\mu}$ of $_{\underline{D}}$ of $_{\underline{D}}$ of $_{\underline{D}}$ of $_{\underline{D}}$ of $_{\underline{D}}$ of $_{\underline{D}}$ personally appeared $_{\underline{D}}$ of $_{\underline{D}}$ as identification, and who acknowledged before me that he/she executed and subscribed these Articles of Incorporation. Signature of Notary Public STATE OF FLORIDA COUNTY OF ALACHUA BEFORE ME this day 16 December , 2019, personally appeared Ingrid C. Henderson, who is personally known to me or who has produced 1506 1/556 403 60 7440 as identification, and who acknowledged before me that he/she executed and subscribed these Articles of Incorporation. Signature of Notary Public Print Name STATE OF FLORIDA COUNTY OF ALACHUA personally known to me or who has produced _ as identification. and who acknowledged before me that he/she executed and subscribed these Articles of Incorporation. Signature of Notary Public INGRID C. HENDERSON Commission # GG 067554 Expires February 20, 2021 Bonded Thru Troy Fain Insurance 800-385-7019

Print Name

STATE OF FLORIDA COUNTY OF ALACHUA				
personally known to me or w	of <u>December</u> , 2019, ho has produced, me that he/she executed and su		_ as identificat	
Signature of Notary Public Jagan'd C. Hender Print Name	INGRID C. HENDERSON Commission # GG 067554 Expires February 20, 2021 Bonded Thru Troy Fain Insurance 800-38	\$-7019		
STATE OF FLORIDA COUNTY OF ALACHUA				
personally known to me or w	of <u>December</u> , 2019, pho has produced me that he/she executed and so		_ as identificat	
Signature of Notary Public Fragrid C. Hender Print Name	INGRID C. HENDERSON Commission # GG 067554 Expires February 20, 2021 Bonded Thru Troy Fain Insurance 800	385-7019		
	ARTICLE XIII - REGISTERED			
The name and Florida Street a	ddress of the registered agent is	i :	s: 2	
Ingrid C. Henderson 921 South East 20 th St	reet, Gainesville, Florida 32641		DZO JAN ECRET Talla	£:f
Registered Agent Sign	ature: Innid C. Hann	···	29 AM ARY OF HASSE	
STATE OF FLORIDA COUNTY OF ALACHUA			7:41 STATE E.FL	O

I, Ingrid C. Henderson, have agreed to act as Registered Agent for Tabernacle of Margaretta Enlightened Church of God, Inc., and realize that I am being designated as such in the records of the said Corporation as well with the Office of the Florida Department of State. The registered office for me as Registered Agent shall be as follows:

I am familiar with and accept the duties and responsibilities as Registered Agent for Tabernacle of . Enlightened Church of God, Inc., until such times as a new Registered Agent may be designated as provided by Florida Law. Dated this ______, 2019. Ingrid C. Henderson Registered Agent STATE OF FLORIDA COUNTY OF ALACHUA BEFORE ME, a notary public authorized to take acknowledgements in the State and County set forth above, personally appeared Iriginal C. Herbian, personally known to me or who has produced FLA H53640365 7440 as identification, to be the person who is nominated to act as the Resident Agent and who acknowledged before me that he/she agreed to undertake said duty. IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at Alachua County, State of Florida, this /6 day of December 2019.

Signature of Notary Public

Sesse Will Land State of International Print Name

| Submit this document and affirm that the facts trained melein are true. | am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in State of Florida, this <a>____ day of <a>___ December submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. Joshua L. Daniels, President/Director Date December 15. 2019