

N2000000 7033

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

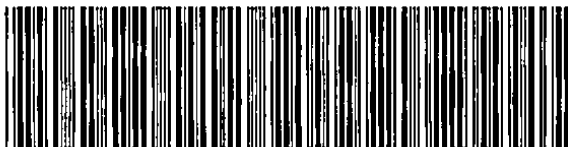
(Business Entity Name)

(Document Number)

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C RICO
JUN 16 2020

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
20 JUN 16 PM 12:43

COVER LETTER

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

SUBJECT: The Promised Child Corporation
(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: Karissa D Williams
Name (Printed or typed)

27615 US Hwy 27, Suite 109, #314
Address

Leesburg, FL 34748-9396
City, State & Zip

352-792-0650
Daytime Telephone number

info@thepromisedchild.org
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 Promised Child Corporation

ARTICLE II PRINCIPAL OFFICE

Principal street address:

27615 U.S. Hwy 27

Suite 109 #314

Leesburg, FL 34748-9396

Mailing address, if different is:

Same

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: The Promised Child is organized exclusively for charitable, religious and educational purposes, including for such purposes the making of distributions to organizations which qualify as exempt organizations under section 501(c)(3) of Internal Revenue Code or corresponding Section of future federal tax code. No part of the net earnings of The Promised Child Corporation shall inure to the benefit of, or be distributable to its members, trustees, officers or other private persons for their private inurement, and that Corporation shall be authorized and empowered to pay reasonable compensation for services rendered and to make payments and distributions in furtherance of its purposes.

ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected and appointed: As stated by the By Laws

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

and Title: Karissa Williams CEO Name and Title: Barbara Gaines Chair

is 27615 U.S. Hwy 27 Address: 27615 U.S. Hwy 27

Suite 109 #314 Suite 109 #314

Leesburg, FL 34748-9396 Leesburg, FL 34748-9396

nd Title: Angelita Stringer Secretary Name and Title: _____

27615 U.S. Hwy 27 Address: _____

Suite 109 #314 _____

Leesburg, FL 34748-9396 _____

d Title: _____ Name and Title: _____

_____ Address: _____

_____ _____

_____ _____

FILED
CLERK OF COURT
20 JUN 15 PM 12:43

Name and Title: _____ Address: _____

Name and Title: _____ Address: _____

ARTICLE VI REGISTERED AGENT

The **name and Florida street address** (P.O. Box NOT acceptable) of the registered agent is:

Name: KARISSA D. WILLIAMS
Address: 27615 U.S. Hwy 27
Suite 109 #314, Leesburg, FL
34748-9396

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
20 JUN 16 PM 12:43

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: KARISSA D. WILLIAMS
Address: 27615 U.S. Hwy 27
Suite 109 #314, Leesburg, FL
34748-9396

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 06/12/2020 (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.)

If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the agent's effective date on the Department of State's records.

I have 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.

Karissa Williams Required Signature of Registered Agent 6/12/2020 Date

I hereby certify 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.

Karissa Williams Required Signature of Incorporator 6/12/2020 Date