

12/14/2020

Division of Corporations
 Florida Department of State
 Division of Corporations
 Electronic Filing Cover Sheet

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To:

Division of Corporations
 Fax Number : (850)617-6381

From:

Account Name : CORPORATION SERVICE COMPANY
 Account Number : I20000000195
 Phone : (850)521-0821
 Fax Number : (850)558-1515

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

FLORIDA PROFIT/NON PROFIT CORPORATION
KOVE FELLOWSHIP CHURCH INC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$70.00

2020 DEC 16 AM 8:38

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Corporate Filing Menu

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Derrick Thompson
12/17/2020

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December 15, 2020

FLORIDA DEPARTMENT OF STATE
Division of Corporations

CORPORATION SERVICE COMPANY

SUBJECT: KOVE FELLOWSHIP CHURCH INC
REF: W20000142734

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Section 617.0202(d), Florida Statutes, requires the manner in which directors are elected or appointed be contained in the articles of incorporation or a statement that the method of election of directors is as stated in the bylaws.

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.

Jalesa S Dennis
Regulatory Specialist II
New Filing Section

FAX Aud. #: H20000426616
Letter Number: 020A00025353

COVER LETTER

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

SUBJECT: KOVE FELLOWSHIP CHURCH INC

(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: _____
Name (Printed or typed)

Address

City, State & Zip

Daytime Telephone number

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: KOVE FELLOWSHIP CHURCH INC

ARTICLE II PRINCIPAL OFFICE

Principal street address:
205 Meadowlark Dr

Osteen, FL 32764

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Church services and bible studies

ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected and appointed: Vote - Majority

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Shirley M Ailes/ Director

Address: 232 Meadowlark Dr
Osteen, FL 32764

Name and Title: Shirley A Fruith/ Director

Address: 205 Meadowlark Dr
Osteen, FL 32764

Name and Title: Richard Rimes/ Director

Address: 112 Kove BLVD
Osteen, FL 32764

Name and Title: _____

Address: _____

Name and Title: Linda T Rapp/ Director

Address: 717 Whippoorwill Lane
Osteen FL 32764

Name and Title: _____

Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

ARTICLE VI REGISTERED AGENTThe name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Corporation Service Company

Address: 1202 Hays Street

Tallahassee, FL 32301

ARTICLE VII INCORPORATORThe name and address of the incorporator is:

Name: Shirley A Fruith

Address: 205 Meadowlark Dr

Osteen, FL 32764

ARTICLE VIII EFFECTIVE DATE:

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**Elizabeth Kitchen*

Elizabeth Kitchen, Assistant Secretary

12/14/2020

Required Signature of Registered Agent

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.**Shirley A Fruith*

Required Signature of Incorporator

12.17.20

Date