

N210000000810

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

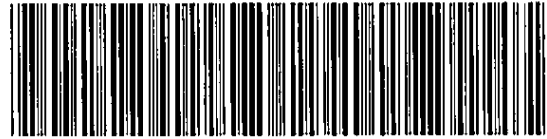
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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RECEIVED
JAN 21 PM 2:09
TALLAHASSEE, FLORIDA

2021 JAN 21 PM 3:14
RECEIVED

COVER LETTER

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

SUBJECT: Damascus Road Evangelical Association Ministries 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: Kasey L. Gordon
Name (Printed or typed)

440 Ave A
Address

Eastpoint, FL 32328
City, State & Zip

850-879-8524
Daytime Telephone number

kaseygakory@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: Damascus Road Evangelical Association Ministries Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address:

440 Ave A

Eastpoint, FL 323208

Mailing address, if different is:

440 Ave A

Eastpoint, FL 32328

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: a church that maintains a place of worship and bible study, and may own and operate ministries to help the homeless, hungry, abused, chemically dependant, convicted felons, and other community needs deemed necessary, we may also own and operate any business related industries to further the community outreach program and church purpose of spreading the gosple of Jesus Christ as well as provide finacial funding of listed purposes. It may also own and operate thrift stores, gather and distruibute food, clothing, furniture, tools, vehicels, household items, appliances, and other necessary items to needy individuals and families. We may also recieve subscriptions and donations of real and personal property to be applied to the above listed uses and purposes of the Corporation.

ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected and appointed: Annual Meeting

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Gordon, Keith, K- President

Name and Title: _____

Address 440 Ave A

Address: _____

Eastpoint, FL 32328

Name and Title: Gordon, Kasey L.- Vice President

Name and Title: _____

Address 440 Ave A

Address: _____

Eastpoint, FL 32328

Name and Title: Warren, Neil- Trustee

Name and Title: _____

Address 1066 Polo Club Dr

Address: _____

Marietta, GA 30064

2021 JAN 21 PM 3:14

Name and Title: Comberford, Ralph Trustee Name and Title: _____

Address: 249 Bay Point Dr Address: _____

Eastpoint, FL 32328 _____

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: Gordon, Keith K. _____

Address: 440 Ave A _____

Eastpoint, FL 32328 _____

ARTICLE VII INCORPORATOR

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

Name: Gordon, Kasey L. _____

Address: 440 Ave A _____

Eastpoint, FL 32328 _____

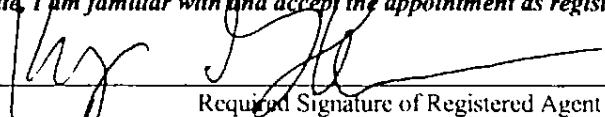
ARTICLE VIII EFFECTIVE DATE:

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




Required Signature of Registered Agent

1-21-21

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.



Required Signature of Incorporator

1-20-21

Date