

N21 0000002970

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

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(Business Entity Name)

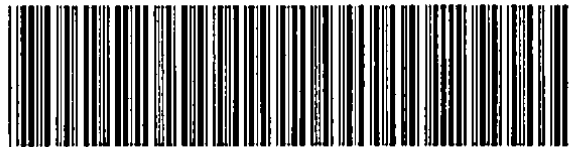
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2021 FEB -3 AM 10:00

FEB 11 2021

COVER LETTER

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

SUBJECT: Treasure City Church of God 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: Rene Evans
Name (Printed or typed)

10941 wingate rd
Address

Jacksonville FL 32218
City, State & Zip

(904) 765-7370
Daytime Telephone number

dekomailey@comcast.net
E-mail address: (to be used for future annual report notification)

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

2021 FEB -3 17:10:00

5711

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

ARTICLE I NAME

The name of the corporation shall be: Treasure City Church of God INC

ARTICLE II PRINCIPAL OFFICE

Principal street address:

159 Clark rd
Jacksonville FL 32218

Mailing address, if different is:

10941 wingate rd.
Jacksonville FL, 32218

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: religious organization, worship

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

Directors are appointed by the Bishop.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Bene Evans (Bishop/Director) Name and Title: Arsheeka Stewart Brinson (Secretary)

Address: 10941 wingate rd Address: 3017 Belden St
Jacksonville FL 32218 Jacksonville FL 32207

Name and Title: Scott Evans (Pastor/Director) Name and Title: Barbara Tukes (Treasurer)

Address: 6386 Bucking Bronco Address: 3705 Rose St.
dr. Jacksonville FL. Jacksonville FL. 32208
32234

Name and Title: Marilyn K. Evans - Name and Title: Leila Warren (Staff)
(Associating Pastor/Director)

Address: 2128 West 18th Street Address: 8466 Sugartree dr.
Jacksonville FL. 32209 Jacksonville FL 32244

Name and Title: Ronald W. Prince (Staff)
Address: 528 Trout River dr
Jacksonville FL 32208

Name and Title: Alisa Carey (Staff)
Address: 528 Trout River dr
Jacksonville FL 32208

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: Rene Evans Jr
Address: 10941 Wingate rd
Jacksonville FL 32218

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Arsheeka Stewart Brinson
Address: 3017 Belden St
Jacksonville FL 32207

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

Rene Evans Jr

Required Signature of Registered Agent

1/29/2021

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.

AS Brinson

Required Signature of Incorporator

1/29/2021

Date