

N210 0000 3028

(Requestor's Name)

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(City/State/Zip/Phone #)

☐ PICK-UP

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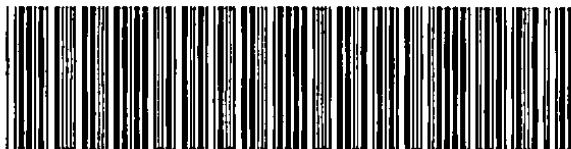
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

D O'KEEFE

MAR 16 2021

W21-15620



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

February 8, 2021

JAMES EDWARD BAKER SR.  
116 NORTH GLENWOOD AVE  
AVON PARK, FL 33825

SUBJECT: CHURCH OF HOPE THAT THE 16 LORD HAS MADE  
Ref. Number: W21000015120

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TALLAHASSEE, FLORIDA

We have received your document for CHURCH OF HOPE THAT THE 16 LORD HAS MADE and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of the entity in the Articles does not match the entity name on the cover letter.

The name must contain a word that will clearly indicate that it is a corporation. This word may be: CORPORATION, CORP., INCORPORATED, or INC. Sections 617.0401(1)(a) and 617.1506(1), Florida Statutes, prohibits the use of the word COMPANY or CO. in the name of a non-profit corporation.

Please return 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.

DANIEL L O'KEEFE  
Regulatory Specialist II

Letter Number: 321A00002781

2021 FEB 18 AM 9:46

## COVER LETTER

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

**SUBJECT:** CHURCH OF HOPE THAT THE LORD HAS MADE MINISTRY 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:** JAMES EDWARD BAKER SR.

\_\_\_\_\_  
Name (Printed or typed)

116 NORTH GLENWOOD AVE

\_\_\_\_\_  
Address

AVON PARK FLORIDA 33825

\_\_\_\_\_  
City, State & Zip

863-873-4684

\_\_\_\_\_  
Daytime Telephone number

bakersrj@yahoo.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** CHURCH OF HOPE THAT THE LORD HAS MADE MINISTRY INC.  
name of the corporation shall be: \_\_\_\_\_

**ARTICLE II PRINCIPAL OFFICE**

Principal <u>street</u> address: 116 NORTH GLENWOOD AVE _____ AVON PARK FLORIDA 33825 _____ _____	Mailing address, if different is: 116 NORTH GLENWOOD AVE _____ AVON PARK FLORIDA 33825 _____ _____
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**ARTICLE III PURPOSE** CHURCH OF HOPE THAT THE LORD HAS MADEministry Inc.is to serve  
purpose for which the corporation is organized is: \_\_\_\_\_  
community with assistance in food spiritual natural eating. provide a place to serve GOd, teach bibical and life skills to our youth  
\_\_\_\_\_ have emergency housing for the homeless . help the elder, Teach the word of God with,  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**ARTICLE IV MANNER OF ELECTION** The manner in which the directors are elected and appointed: By Vote  
\_\_\_\_\_

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: James Edward Baker SR, President Address: 116 NORTH GLENWOOD AVE _____ AVON PARK FLORIDA 33825 _____ _____	Name and Title: CHARLOTTE BAKER SECTARY Address: 701 DOME AVENUE _____ AVON PARK FLORIDA 33825 _____ _____
Name and Title: MARY TRAMEL JOHNSON VIC PRESI Address: 1668 TANGELO STREET _____ LAKE WALES FLORIDA 33898 _____ _____	Name and Title: _____ Address: _____ _____ _____ _____ _____
Name and Title: PATRICIA ROBERTS TREASURE Address: 522 WEST CIRCLE STREET _____ AVON PARK FLORIDA 33825 _____ _____	Name and Title: _____ Address: _____ _____ _____ _____ _____

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TALLAHASSEE, FLORIDA

Name and Title:	_____	Name and Title:	_____
Address:	_____	Address:	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**ARTICLE VI REGISTERED AGENT**

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

Name: JAMES EDWARD BAKER SR.  
 Address: 116 NORTH GLENWOOD AVE  
 AVON PARK FLORIDA 33825

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 21 FEB 18 AM 11:53  
 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

**ARTICLE VII INCORPORATOR**

Name and address of the Incorporator is:

Name: JAMES EDWARD BAKER SR.  
 Address: 116 NORTH GLENWOOD AVE  
 AVON PARK FLORIDA 33825

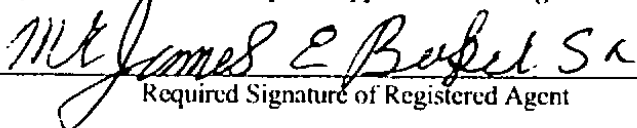
**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: 01-14-2021. (OPTIONAL)

If the effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

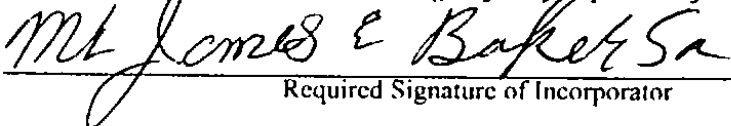
If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the agent's effective date on the Department of State's records.

I, the undersigned, being 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

01-14-2021  
 Date

I hereby certify that 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

01-14-2021  
 Date