

N210000008152

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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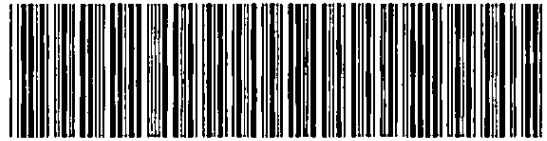
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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TALLAHASSEE, FLORIDA

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7/7/21

# ARTICLES OF INCORPORATION

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

## ARTICLE I NAME

The name of the corporation shall be: **PAJ HELP MINISTRIES, INC.**

## ARTICLE II PRINCIPAL OFFICE

*Principal street address:* 7025 CR 46A Ste. 1071 #335

*Lake Mary, Florida 32746-4753*

## ARTICLE III PURPOSE

- (1) Primarily, the organization is formed exclusively for charitable and educational purposes within the meaning of IRC Section 501(c)(3):
- (2) Generally, to have and exercise all rights and powers conferred on nonprofit corporations under the laws of Florida, or which may hereafter be conferred, including the power to contract, rent, buy, or sell personal or real property:
- (3) Notwithstanding any of the above statements of purposes and powers, this corporation shall not engage in any activities or exercise any powers that are not in furtherance of the primary purpose of this corporation:
- (4) No part of the net earnings of the corporation shall inure to the benefit of, or be distributable to its members, trustees, officers, or other private persons, except that the corporation shall be authorized and empowered to pay reasonable compensation for services rendered and to make payments and distributions in furtherance of the purposes set forth in Article Three hereof.
- (5) No substantial part of the activities of the corporation shall be the carrying on of propaganda, or otherwise attempting to influence legislation, and the corporation shall not participate in, or intervene in (including the publishing or distribution of statements) any political campaign on behalf of or in opposition to any candidate for public office:

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## COVER LETTER

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

PAJ HELP MINISTRIES, INC.

**SUBJECT:** \_\_\_\_\_  
(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**

DR PRESTON ADAMS

**FROM:** \_\_\_\_\_  
Name (Printed or typed)  
7025 CR 46A Ste. 1071 #335  
\_\_\_\_\_  
Address  
LAKE MARY FLORIDA 32746-4753  
\_\_\_\_\_  
City, State & Zip  
(407) 399-0513  
\_\_\_\_\_  
Daytime Telephone number  
Preston@DrPrestonAdams.com

E-mail address: (to be used for future annual report notification)

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

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- (6) Upon the dissolution of the corporation, assets shall be distributed for one or more exempt purposes within the meaning of section 501(c)(3) of the Internal Revenue Code, or the corresponding section of any future federal tax code, or shall be distributed to the federal government, or to a state or local government, for a public purpose. Any such assets not so disposed of shall be disposed of by a Court of competent jurisdiction of the county in which the principal office of the corporation is then located, exclusively for such purposes or to such organization or organizations, as said Court shall determine which are organized and operated exclusively for such purposes.

**ARTICLE IV MANNER OF ELECTION:** The manner in which the directors are elected and appointed: The method of election of the directors of the Corporation is set forth in the bylaws.

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

<u>Name:</u>	<u>Title:</u>	<u>Address:</u>
<u>ADAMS, DR PRESTON</u>	<u>- PRESIDENT CEO</u>	7025 CR46A Ste. 1071 #335 <u>LAKE MARY, FLORIDA 32746-4753</u>
<u>HOLLINGSWORTH, RINA</u>	<u>- TREASURER/SEC.</u>	7025 CR46A Ste. 1071 #335 <u>LAKE MARY, FLORIDA 32746-4753</u>
<u>HOLLINGSWORTH, TERRANCE</u>	<u>- DIRECTOR</u>	7025 CR46A Ste>1071 #335 <u>LAKE MARY, FLORIDA 32746-4753</u>

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

**NAME:** DR. PRESTON ADAMS

**ADDRESS:** 7025 CR46A Ste. 1071#335

LAKE MARY, FLORIDA 32746-4753



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## **ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

**NAME:** DR. PRESTON ADAMS

**ADDRESS:** 7025 CR46A Ste. 1071 #335

LAKE MARY, FLORIDA 32746-4753

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## **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 effective date on the Department of State's records.

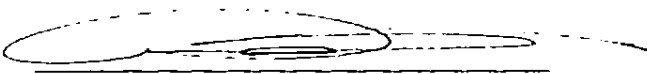
*Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity*



Required Signature of Registered Agent

6/30/2021  
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.*



Required Signature of Incorporator

6/30/2021  
Date

## **ARTICLE IX LIABILITY STATEMENT**

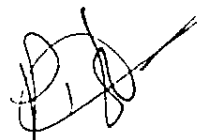
- The nonprofit shall defend, indemnify and hold harmless all directors and officers of the nonprofit against expenses (including attorney's fees, judgments, fines, and amounts paid in settlement) incurred in connection with any claims, causes of action, demands,

damages, liabilities of the nonprofit, and any pending or threatened action, suit, or proceeding. Such indemnification shall be made to the fullest extent permitted by the laws of the State of Florida, provided that such acts or omissions which gives rise to the cause of action or proceedings occurred while the director or officer was in performance of his or her duties for the nonprofit and was not as a result of his or her fraud, gross negligence, willful misconduct or a wrongful taking. The indemnification provided herein shall inure to the benefit of successors, assigns, heirs, executors, and the administrators of any such person.

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A handwritten signature in black ink, appearing to be a stylized 'D' followed by a flourish.