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(R	equestor's Name)	
(A	ddress)	
(A	ddress)	
(C	ity/State/Zip/Phone #))
PICK-UP	☐ WAIT	MAIL
(B	usiness Entity Name)	
(D	ocument Number)	
Certified Copies	Certificates of	Status
Special Instructions to	Filing Officer:	

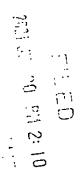
Office Use Only



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8/4/21



COVER LETTER

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

SUBJECT: A CIRCLE O	BJECT: A CIRCLE OF SISTERS IN CHRIST INC. (PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)				
Enclosed is an original a	nd one (1) copy of the Ar	ticles of Incorporation and	a check for :		
\$70.00	□ \$78.75	\$78.75	□ \$87.50		
Filing Fee	Filing Fee & Certificate of	Filing Fee & Certified Copy	Filing Fee, Certified Copy		
	Status		& Certificate		
		ADDITIONAL CO	PY REQUIRED		
	LOVETTE DOBSON				
FROM:		me (Printed or typed)	-		

Daytime Telephone number

EFILE1234@INCFILE.COM

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

17350 STATE HWY 249 #220

HOUSTON, TX 77064

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

Address

City, State & Zip

ARTICLES OF INCORPORATION

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

<u>ARTICLE II</u>	PRINCIPAL OFFICE				
	Principal street address:		Mailing address, if different is:		
432	4320 COUNTRY HILLS BLVD PLANT CITY, FLORIDA 33563 HILLSBOROUGH		4320 COUNTRY HILLS BLVD, PLANT CITY, FLORIDA 33563 HILLSBOROUGH		
PL					
HIL					
<u>ARTICLE II</u>	I PURPOSE				
The purpose	for which the corporation is organized is:				
Womens chr	ristian ministry				
<u> </u>					
 -					
ARTICLE IV	MANNER OF ELECTION The ma	nner in which the d	irectors are elected and appointed: BY LAWS		
			irectors are elected and appointed: BY LAWS		
RTICLE V		CCTORS	irectors are elected and appointed: BY LAWS tle: Katrina Laster (DIRECTOR)		
	INITIAL OFFICERS AND/OR DIRE	CCTORS Name and Ti			
I <i>RTICLE_V</i> Name and Tit	INITIAL OFFICERS AND/OR DIRECTOR) Asonja Porter (DIRECTOR) 4320 Country Hills Blvd,	CCTORS	tle: Katrina Laster (DIRECTOR) 4320 Country Hills Blvd.		
I <i>RTICLE_V</i> Name and Tit	INITIAL OFFICERS AND/OR DIRE	CCTORS Name and Ti	tle: Katrina Laster (DIRECTOR) 4320 Country Hills Blvd, Plant City FL 33563		
ARTICLE V Name and Tit Address	INITIAL OFFICERS AND/OR DIRECTOR) 4320 Country Hills Blvd. Plant City FL 33563	CTORS Name and Ti Address:	tie: Katrina Laster (DIRECTOR) 4320 Country Hills Blvd. Plant City FL 33563		
ARTICLE V Name and Tit Address	INITIAL OFFICERS AND/OR DIRECTOR) Asonja Porter (DIRECTOR) 4320 Country Hills Blvd, Plant City FL 33563	CCTORS Name and Ti Address: Name and Ti	tle: Katrina Laster (DIRECTOR) 4320 Country Hills Blvd. Plant City FL 33563 tle: Felicia Robinson (DIRECTOR)		
Name and Tit Address	INITIAL OFFICERS AND/OR DIRECTOR) 4320 Country Hills Blvd, Plant City FL 33563 Ple: Natasha Sherman (DIRECTOR) 4320 Country Hills Blvd,	CTORS Name and Ti Address:	tile: Katrina Laster (DIRECTOR) 4320 Country Hills Blvd. Plant City FL 33563 tile: Felicia Robinson (DIRECTOR). 4320 Country Hills Blvd.		
Name and Tit Address	INITIAL OFFICERS AND/OR DIRECTOR) Asonja Porter (DIRECTOR) 4320 Country Hills Blvd, Plant City FL 33563	CCTORS Name and Ti Address: Name and Ti	tle: Katrina Laster (DIRECTOR) 4320 Country Hills Blvd. Plant City FL 33563 tle: Felicia Robinson (DIRECTOR)		
Name and Tit Address	INITIAL OFFICERS AND/OR DIRECTOR) 4320 Country Hills Blvd, Plant City FL 33563 Ile: Natasha Sherman (DIRECTOR) 4320 Country Hills Blvd, Plant City FL 33563	CTORS Name and Ti Address: Name and Ti Address:	tle: Katrina Laster (DIRECTOR) 4320 Country Hills Blvd, Plant City FL 33563 tle: Felicia Robinson (DIRECTOR). 4320 Country Hills Blvd, Plant City FL 33563		
ARTICLE V Name and Tit Address Name and Tit Address	INITIAL OFFICERS AND/OR DIRECTOR) 4320 Country Hills Blvd, Plant City FL 33563 Ile: Natasha Sherman (DIRECTOR) 4320 Country Hills Blvd, Plant City FL 33563	CTORS Name and Ti Address: Name and Ti Address: Name and Ti	tile: Katrina Laster (DIRECTOR) 4320 Country Hills Blvd. Plant City FL 33563 tile: Felicia Robinson (DIRECTOR). 4320 Country Hills Blvd.		

Name and Title	:	Name and Title:	
Address		Address:	
			
			····
Name and Title	:	Name and Title:	
Address		Address:	
			
ARTICLE VI	<u>REGISTERED AGENT</u> Florida street address (P.O. Box NOT acc	centable) of the registered agent is:	
Name:	ASONJA PORTER		
Address:	4320 COUNTRY HILLS BLVD		
	PLANT CITY 33563		
ARTICLE VII	INCORPORATOR		£ .1
	address of the Incorporator is:		3 11
Name:	LOVETTE DOBSON		골 이
Address:	17350 STATE HWY 249 #220		2: 10
	HOUSTON, TX 77064		
	EFFECTIVE DATE: if other than the date of filing:	(OPTION.	Δ1)
(If an effective	date is listed, the date must be specific	and cannot be more than five days	s prior or 90 days after the filing.)
	te inserted in this block does not meet the active date on the Department of State's re-		ents, this date will not be listed as the
	amed as registered agent to accept service familiar with and accept the appointment	t as revistered avent and avree to ac	
	Required Signature of Registere	a Voiter	07/19/2021
	Required Signature of Registere	d Agent	Date
	cument and affirm that the facts stated he ent of State constitutes a third degree felon	y as provided for in s.817.155, F.S.	alse information submitted in a documen
	Howette Dobson Required Signature of Inco		07/19/2021
	Required Signature of Inco	orporator	Date

501c3 language

Said corporation is organized exclusively for charitable, religious, educational, and scientific purposes, including, for such purposes, the making of distributions to organizations that qualify as exempt organizations under Section 501(c)(3) of the Internal Revenue Code, or the corresponding section of any future federal tax code.

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 these articles.

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. Notwithstanding any other provision of these articles, the corporation shall not carry on any other activities not permitted to be carried on (a) by a corporation exempt from federal income tax under Section 501(c)(3) of the Internal Revenue Code, or the corresponding section of any future federal tax code, or (b) by a corporation, contributions to which are deductible under Section 170(c)(2) of the Internal Revenue Code, or the corresponding section of any future federal tax code.

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.



COVER LETTER

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

BJECT: A CIRCLE	OF SISTERS IN CHRIST INC	.	
	(PROPOSED CORP	PORATE NAME – <u>MUST IN</u>	CLUDE SUFFIX)
closed is an original a	and one (1) copy of the Ar	ticles of Incorporation and	a check for:
\$70.00	□ \$78.75	\$78.75	□ \$87.50
Filing Fee	Filing Fee &	Filing Fee	Filing Fee,
6	Certificate of	& Certified Copy	
	Status		& Certificate
		ADDITIONAL CO	PY REQUIRED
	LOVETTE DODGON		
FROM:	LOVETTE DOBSON	me (Printed or typed)	_
	•	(
	17350 STATE HWY 249 #2	20	
		Address	_
	HOUDTON TV 77004		
	HOUSTON, TX 77064	City, State & Zip	_
		City, State & Zip	
	888-462-3453		
	Dayti	ime Telephone number	-
			- - -
	EFILE1234@INCFILE.COM	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)

<u>ARTICLE I</u>	PRINCIPAL OFFICE		
	Principal street address:		Mailing address, if different is:
43	20 COUNTRY HILLS BLVD	4	320 COUNTRY HILLS BLVD,
PL	ANT CITY, FLORIDA 33563		PLANT CITY, FLORIDA 33563
_НІІ	LSBOROUGH		IILLSBOROUGH
ARTICLE II The purpose	I PURPOSE for which the corporation is organized is:		
Womens ch	ristian ministry		
			1.00
ARTICLE IV	/ MANNER OF ELECTION The ma	nnner in which the d	rectors are elected and appointed: BY LAW
ARTICLE V	INITIAL OFFICERS AND/OR DIRE	ECTORS	
ARTICLE V	INITIAL OFFICERS AND/OR DIRE le: Asonja Porter (DIRECTOR)	ECTORS Name and Tit	lc: Katrina Laster (DIRECTOR)
	INITIAL OFFICERS AND/OR DIRE	ECTORS Name and Tit Address:	lc: Katrina Laster (DIRECTOR)
ARTICLE V Name and Tit Address	INITIAL OFFICERS AND/OR DIRE le: Asonja Porter (DIRECTOR) 4320 Country Hills Blvd,	ECTORS Name and Tit Address:	le: Katrina Laster (DIRECTOR) 4320 Country Hills Blvd, Plant City FL 33563
ARTICLE V Name and Tit Address	INITIAL OFFICERS AND/OR DIRE le: Asonja Porter (DIRECTOR) 4320 Country Hills Blvd, Plant City FL 33563	Name and Tit Address: Name and Tit	le: Katrina Laster (DIRECTOR) 4320 Country Hills Blvd, Plant City FL 33563 le: Felicia Robinson (DIRECTOR) 4320 Country Hills Blvd,
ARTICLE V Name and Tit Address	INITIAL OFFICERS AND/OR DIRE le: Asonja Porter (DIRECTOR) 4320 Country Hills Blvd, Plant City FL 33563	Name and Tit Address: Name and Tit	le: Katrina Laster (DIRECTOR) 4320 Country Hills Blvd, Plant City FL 33563 le: Felicia Robinson (DIRECTOR) 4320 Country Hills Blvd, Plant City FL 33563
ARTICLE V Name and Tit Address Name and Tit Address	INITIAL OFFICERS AND/OR DIRE le: Asonja Porter (DIRECTOR) 4320 Country Hills Blvd, Plant City FL 33563 le: Natasha Sherman (DIRECTOR) 4320 Country Hills Blvd,	Name and Tit Address: Name and Tit Address: Address:	le: Katrina Laster (DIRECTOR) 4320 Country Hills Blvd, Plant City FL 33563 le: Felicia Robinson (DIRECTOR) 4320 Country Hills Blvd, Plant City FL 33563

Name and Title:	·	Name and Title	: <u> </u>		
Address _		Address:			_
_					_
_		_			
Name and Title:_		Name and Title	: <u></u>		_
Address _	<u></u>	Address:			_
_		_		- -	_
_		_			_
	REGISTERED AGENT orida street address (P.O. Box NOT acc	centable) of the revi	stered agent is:		
The name and Ph		septatore) or the rog.	mered agent io		
Name:	ASONJA PORTER				
Address:	4320 COUNTRY HILLS BLVD				
	PLANT CITY 33563				
	INCORPORATOR				
The name and ad	dress of the Incorporator is:				
Name:	LOVETTE DOBSON				
Address:	17350 STATE HWY 249 #220				
	HOUSTON, TX 77064				
ARTICLE VIII	EFFECTIVE DATE:				
Effective date, if o	ther than the date of filing: ite is listed, the date must be specific a		(OPTIONAL)	ior or 90 days afte	r the filing)
ir an effective da	ite is fisted, the date must be specific.	ing cannot be mor	e than nve days pri	ioi or yo days aree	r the ming.)
Note: If the date i	nserted in this block does not meet the a	applicable statutory	filing requirements.	this date will not b	e listed as the
	ve date on the Department of State's rec				
					<u>.</u>
laving been nam	ed as registered agent to accept service	e of process for the	e above stated corpo	ration at the place	designated in this
vertificate, I am fa	miliar with and accept the appointment	as registerea agent	and agree to act in t	ніх сарасну	O
	deni	·a War	tes	07/19/2021	PI
	Required Signature of Registere	d Agent		07/19/2021 Date	(N)
submit this docui	nent and affirm that the facts stated her	rein are true. I am	aware that any false		•
o the Department	of State constitutes a third degree felony	y as provided for in	s.817.155, F.S.		., 0
	Livetic Dobson			07/19/2021	
	Required Signature of Inco	prporator		Date	

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