

N21000013452

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

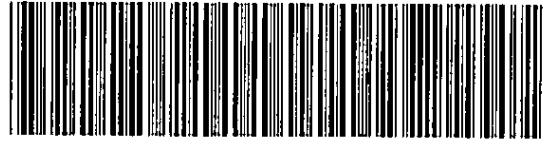
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700376664467

11/17/21--01014--000 **07.50

(Signature)
11/29/21

FILED
2021 NOV 17 AM 7:36
SECURED COPY
TALL, MISSISSIPPI

c

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

ARTICLE I NAME

The name of the corporation shall be: B.O.C. HOPE CHEST, INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address:
1141 KENDALL TOWN BLVD,

APT # 1211

JACKSONVILLE, FL 32225

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: TO IMPROVE THE QUALITY OF LIFE FOR THE HOMELESS MEN,
WOMEN AND CHILDREN. SHOWING KINDNESS AND COMPASSION WHILE PROVIDING SPIRITUAL COUNSELING,
COMMUNITY CONNECTIONS, ASSISTANCE AND RESOURCES NEEDED TO MOVE FORWARD TO A HEALTHIER
AND PRODUCTIVE LIFE STYLE.

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

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: BETTIE A. CITIZEN PRESIDENT/CEO

Address: 1141 KENDALL TOWN BLVD # 1211
JACKSONVILLE, FL 32225

Name and Title: EDNA LITTLE VICE PRESIDENT

Address: 11315 WOODSONG LOOP
JACKSONVILLE, FL 32225

Name and Title: SHELIA M. TOMENGO DIRECTOR

Address: 721 BONSAI STREET
APOPKA, FL 32703

Name and Title: ROSE CLEMMONS DIRECTOR

Address: 235 W. GRANT LINE ROAD # 129
TRACY, CA 95376

Name and Title: ANAYA R. JACKSON DIRECTOR

Address: 26850 U.S. 380 # 5502
AURBEY, TEXAS 75068

Name and Title: BRIDGET R. MOBLEY TREASURE

Address: 1935 S. TROPICAL TRAIL
MERRITT ISLAND, FL 32952

SECRET
TALL

2021 NOV 17 AM 7:36

FILED

Name and Title: CHEKITA CHAMPAGNEE Name and Title: _____
Address: 8335 FREEDOM CROSSING TRAIL Address: _____
APT# 2908 _____
JACKSONVILLE, FL 32256 _____

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: BRUCE A. JOHNSON
Address: 3918 GILA LANE
JACKSONVILLE, FL 32207

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: BETTIE A. CITIZEN
Address: 1141 KENDALL TOWN BLVD # 1211
JACKSONVILLE, FL 32225

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

Bruce A. Johnson

Required Signature of Registered Agent

NOVEMBER 12, 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.

Bettie A. Citizen

Required Signature of Incorporator

NOVEMBER 12, 2021

Date

2021 NOV 17 AM 7:36
FILED
CLERK OF COURT
JACKSONVILLE, FL