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2023 JAN 20 PM 3:36

SECRETARY OF STATE
TALLAHASSEE, FL

COVER LETTER

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

SUBJECT: ALDERSGATE KINGDOM BUILDERS ENRICHMENT CENTER, 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: HELEN WINFREE

Name (Printed or typed)

6915 A Hwy 29

Address

Molino, FL 32577

City, State & Zip

850-850-587-5294

Daytime Telephone number

hwinfree@kingdombuildersec.org

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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TALLAHASSEE, FL

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

ARTICLE I NAME

The name of the corporation shall be: ALDERSGATE KINGDOM BUILDERS ENRICHMENT CENTER, INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address:
6915 Hwy 29

Molino, FL 32577

Mailing address, if different is:
6915 A Hwy 29

Molino, FL 32577

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: KINGDOM BUILDERS ENRICHMENT CENTER (KBEC) IS AN
OUTREACH MINISTRY OF ALDERSGATE UNITED METHODIST CHURCH AND I ORAGANIZED 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 503(C)(3) OF THE INTERNAL REVENUE CODE, OR CORRESPONDING SECTION OF ANY FUTURE
FEDERAL TAX CODE.

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

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: HELEN WINFREE , PRESIDENT

Address: 2791 CRABTREE CHURCH RD
MOLINO, FL 3257

Name and Title: _____

Address: _____

Name and Title: STEPHANIE HUGHES, SECRETARY

Address: 4501 CHESTNUT RD
MOLINO, FL 32577

Name and Title: _____

Address: _____

Name and Title: LONNY HUGHES, TREASURER

Address: 4501 CHESTNUT RD
MOLINO, FL 32577

Name and Title: _____

Address: _____

SECRETARY OF STATE
TALLAHASSEE, FL

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Name and Title: _____ Name and Title: _____

Address _____ Address: _____

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: HELEN WINFREE _____

Address: 2791 CRABTREE CHURCH RD _____

MOLINO, FL 32577 _____

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: HELEN WINFREE _____

Address: 2791 CRABTREE CHURCH RD _____

MOLINO, FL 32577 _____

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TALLAHASSEE, FL

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

Helen J. Winfree
Required Signature of Registered Agent

1-13-23
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 §817.155, F.S.

Helen J. Winfree
Required Signature of Incorporator

1-13-23
Date