

N 23 000002834

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

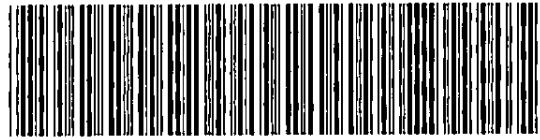
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SECRETARY OF STATE
TALLAHASSEE, FL 32399

23 FEB 28 AM 5:57

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COVER LETTER

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

SUBJECT: St. James Independent Methodist Church, 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: NCLL/Attn.: Carey Ugas
Name (Printed or typed)

13790 Roosevelt Blvd., Suite A
Address

Clearwater, FL 33762
City, State & Zip

727-605-0129
Daytime Telephone number

trumpv@hotmail.com
E-mail address: (to be used for future annual report notification)

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SECRETARY OF STATE
TALLAHASSEE, FL 32314

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

Name and Title: Elaine Ridaught, D Name and Title: _____

Address: 283 East River Road Address: _____

East Palatka, FL 32131

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: Virginia Trump

Address: 101 Rebecca Lane

Palatka, FL 32177

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: William Breuer

Address: 772 Kings Estate Road

St. Augustine, FL 32086

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

Virginia Trump

Required Signature of Registered Agent

2/11/2023

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.

William X Breuer

Required Signature of Incorporator

2/15/2023

Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA