

N23000003759

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

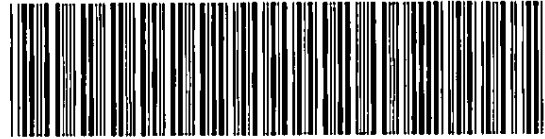
(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600404129536

03/15/23--01010-- 100 **87.30

ALL INFORMATION CONTAINED HEREIN IS UNCLASSIFIED

2023 MAR 15 AM 7:52

COVER LETTER

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

SUBJECT: Mount Olive African Methodist Episcopal Church, Evinston, 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: Rev. Harrington Smith
Name (Printed or typed)

808 Kettle Circle S
Address

Daytona Beach, FL 32114
City, State & Zip

386-316-2519
Daytime Telephone number

smith_harrington@gmail.com
E-mail address: (to be used for 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)

ARTICLE I NAME

The name of the corporation shall be: Mount Olive African Methodist Episcopal Church, Evinston, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address:

8216 S. E. 185th Ave

Micanopy, FL 32667

Mailing address, if different is:

P.O. Box 24

Evinston, FL 32633

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: to make the biblical principles on which Christianity was founded available to everyone, without regard for race, color, creed, national origin, gender or age; to teach, preach and advance the Gospel of Jesus Christ; to provide continuing education programs designed to enhance the spiritual, physical, mental, social, and intellectual growth of all people.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected and appointed: The Presiding Bishop appoints the elder and pastor. The elder recommends pastoral appointments to the Bishop. The pastor appoints stewards and recommends trustees to the members. The members elect trustees.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

The Right Rev. Frank Madison Reid, III

Name and Title: Presiding Bishop

Address: 101 E. Union St.
Jacksonville, FL 32202

Name and Title: Victoria Haynes-Johnson, Steward

Address: 22791 Highway 441 North
Micanopy, FL 32667

Rev. Tony DeMarco Hansberry
Name and Title: Presiding Elder

Address: 101 E. Union St
Jacksonville, FL 32202

Name and Title: Cecil Copelin, Trustee

Address: 2160 N. W. 44th Ave
Micanopy, FL 32667

Rev. Harrington Smith, Pastor
Name and Title: Pastor

Address: 808 Kettle Circle S
Daytona Beach, FL 32114

Name and Title: Karen Strobes-Edwards, Steward

Address: 835 S. E. 10th Terrace
Gainesville, FL 32601

2023 MAR 15

11:07 AM

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: Rev. Harrington Smith

Address: 808 Kettle Circle S
Daytona Beach, FL 32114

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Victoria Haynes-Johnson

Address: 22791 Highway 441 North
Micanopy, FL 32667

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

H. Amatt
Required Signature of Registered Agent

March 13, 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.

Victoria Haynes-Johnson
Required Signature of Incorporator

March 13, 2023
Date

2023 MAR 15 AM 7:52
VAL. AMENDED