

N23000007684

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(Business Entity Name)

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TALLAHASSEE, FL

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Handwritten mark

FLORIDA CAPITAL COURIER SERVICES, INC
2330 CLARE DRIVE
TALLAHASSEE, FL 32309
(850) 524-5437
(850) 524-6243

Please use funds from account: 120210000160: \$70.00

Authorization Signature: 

Pierson Methodist Church, Inc.

Business

DOC#

 Certified Copy

 Certificate of Status

NEW FILINGS

- Profit Corp
- Not for Profit
- Officer/Director
- Limited Liability
- Domestication
- X **CORP**
- LLLP**

AMENDMENTS

- Amendment
- Resignation of R.A. or member
- Dissolution
- Change of Registered Agent
- Conversion**
- Amended and restated Articles**
- Statement of Correction**

OTHER FILINGS

- Trademark**
- Annual Report
- Fictitious Name
- APOSTILL**
- COUNTRY

REGISTRATION/QUALIFICATIONS

- Foreign filing
- Limited Partnership
- Reinstatement
- Other

EXAMINER'S INITIALS:

COVER LETTER

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

SUBJECT: Pierson 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

rosefern48@aol.com
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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ARTICLES OF INCORPORATION
In compliance with Chapter 617, F.S., (Not for Profit)

ARTICLE I NAME

The name of the corporation shall be: Pierson Methodist Church, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address:

136 West Second Avenue

Pierson, Florida 32180

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: _____

The organization 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.

ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected and appointed: _____
according to the bylaws.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Julian Proctor, D

Address: 860 Peterson Road

Pierson, Florida 32180

Name and Title: Patricia Sowell, D

Address: 392 Turner Road

Pierson, Florida 32180

Name and Title: Mellie Jo Turner, D

Address: 465 East Franklin Street

Pierson, Florida 32180

Name and Title: Barbara Jean Bennett, D

Address: 439 North Pine Street

Pierson, Florida 32180

Name and Title: John C Muller, D

Address: 257 South Volusia Avenue

Pierson, Florida 32180

Name and Title: _____

Address: _____

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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: Dorrie Jean M Muller
 Address: 257 South Volusia Avenue
Pierson, Florida 32180

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Julian Proctor
 Address: 860 Peterson Road
Pierson, Florida 32180

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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

Dorrie Jean M. Muller
 Required Signature of Registered Agent

6-22-2023
 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.

Julian Proctor
 Required Signature of Incorporator

6-23-2023
 Date