

N230000009351

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

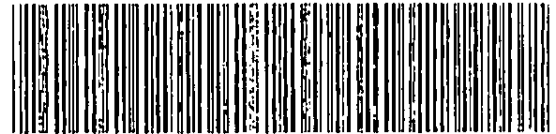
(Business Entity Name)

(Document Number)

Certific Copies _____ Certificates of Status _____

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CLERK OF STATE
TALLAHASSEE, FL

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Tax Professional Services, LLC

A Financial Services Corporation

1105 W Maple Ave

Geneva, AL 36340

334-684-6398

334-684-7193 -fax

www.taxprollc.com

Members: National Society of Accountants, National Association of Enrolled Agents, National Society of Tax Professionals, American Society of Problem Solvers

July 10, 2023

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

To whom it may concern,

Enclosed you will find: original and one copy of Articles of Incorporation, check for payment and a self addressed & stamped envelope.

Please register the enclosed Four Oceans Missions, Inc. and return the original recorded Articles of Incorporation to us.

Thank you,

U. Steiner

Ulli Steiner
Tax Professional Services, LLC

Enc.

Cert#: 7020 2410 0001 5305 9984

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STATE OF FLORIDA
TALLAHASSEE, FL

FILED

COVER LETTER

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

SUBJECT: Four Oceans Missions, 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: Ulli Steiner
Name (Printed or typed)

1105 W Maple Ave
Address

Geneva, AL 36340
City, State & Zip

334-684-6398
Daytime Telephone number

ulli@taxprollc.com

E-mail address: (to be used for future annual report notification)

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

DEPARTMENT OF STATE
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: Four Oceans Missions, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address:
2832 Hwy 79

Vernon, FL 32462

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Said 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 corresponding section of any future federal tax code.

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

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Torrey Blackmon, President

Address: 2832 Hwy 79
Vernon, FL 32462

Name and Title: Candice Blackmon, S/T

Address: 2832 Hwy 79
Vernon, FL 32462

Name and Title: Jack Smith, Vice President

Address: 2832 Hwy 79
Vernon, FL 32462

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

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: Candice Blackmon

Address: 2832 Hwy 79

Vernon, FL 32462

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Ulli Steiner

Address: 1105 W Maple Ave

Geneva, AL 36340

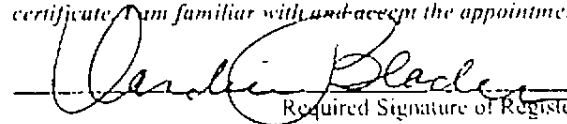
ARTICLE VIII EFFECTIVE DATE:

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.


Required Signature of Registered Agent

7/10/23
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 s.817.155, F.S.


Required Signature of Incorporator

7-10-2023
Date

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2023 JUL 13 PM 2:17
TALLAHASSEE, FL
CLERK OF THE COURT

STATE OF FLORIDA

DOMESTIC NON-PROFIT CORPORATION

ATTACHMENT TO: ARTICLES OF INCORPORATION

Four Oceans Missions, Inc.

ARTICLE IV MANNER OF ELECTION:

The Corporation shall have no voting members. The directors of the Corporation shall be elected in accordance with methods and qualifications specified in the bylaws of the Corporation. In no event, shall the number of directors be fewer than three. No Director shall have any right, title or interest in or to any property of the Corporation.

ARTICLE IX DISSOLUTION:


Upon the dissolution of the corporation, assets shall be distributed for one or more exempt purposes within the meaning of section 501(c)(3) of the Internal Revenue Code, or the corresponding section of any future federal tax code, or shall be distributed to the federal government, or to a state or local government, for a public purpose. Any such assets not so disposed of shall be disposed of by a Court of Competent Jurisdiction of the county in which the principal office of the corporation is then located, exclusively for such purposes or to such organization or organizations, as said Court shall determine, which are organized and operated exclusively for such purposes.

July 10, 2023

Ulli Steiner

Print name of Incorporator

Prepared by:
Tax Professional Services, LLC
1105 W Maple Ave
Geneva, AL 36340



Signature of Incorporator