## N23000012772

(R	equestor's Name)	
(Ā	ddress)	
<b>,</b>		
(A	ddress)	
	ity/State/Zip/Phone #)	
(0	ity/Otate/Zip/Filone #/	
	<b>—</b>	<b>—</b>
PICK-UP	WAIT	MAIL
70	usiness Entity Name)	
a)	usiness Entity Name)	
(D	ocument Number)	
	0.46.44.4	of Dhahan
ertified Copies	Certificates of	or Status
Special Instructions to Fil	ing Officer.	

Office Use Only



300417582333



FLORIDA CAPITAL COURIER SERVICES,	INC
2330 CLARE DR	•
TALLAHASSEE, FL 32309	
(850) 524–5437 / (850) 524–6243 / (85	50) 491–9625
Please use funds from this acc	
Authorization Signature:	fan hell :
CONWAY COMMUNITY CHUR	0
BUSINESS NAME	DOCUMENT #
Certified Copy	
Certificate of Status	
NEW FILINGS	<u>AMMENDMENTS</u>
Profit Corp	Amendment
Not for Profit	Resignation of R.A. Officer/Director
Limited Liability	Change of Registered Agent
Domestication	Revocation of Dissolution
LLLP	Merger
_X_CORP	Articles of Conversion
Other	Restated Articles of Incorporation
Other	Statement of Authority
OTHER FILINGS	REGISTERATION/QUALIFICATIONS
Apostille	Foreign filing
Country	Reinstatement
Annual Report	Qualification
Fictitious Name	Other

EXAMINER'S INITIALS:\_\_\_\_

2330 CLARE DR			
TALLAHASSEE, FL 32309			
(850) 524-5437 / (850) 524-6243 / (8	850) 491–9625		
Please use funds from this a	ccount: 120210000160: \$70.00		
Authorization Signature:	Janifull:		
CONWAY COMMUNITY CHU	RCH, INC		
BUSINESS NAME	DOCUMENT #		
Certified Copy			
Certificate of Status			
NEW FILINGS	<u>AMMENDMENTS</u>		
Profit Corp	Amendment		
Not for Profit	Resignation of R.A. Officer/Director		
Limited Liability	Change of Registered Agent		
Domestication	Revocation of Dissolution		
LLLP	Merger		
_X_CORP	Articles of Conversion		
Other	Restated Articles of Incorporation		
Other	Statement of Authority		
OTHER FILINGS	REGISTERATION/QUALIFICATIONS		
Apostille	Foreign filing		
Country	Reinstatement		
Annual Report	Qualification		
Fictitious Name	Other		
EXAMINER'S INITIALS:			

\* FLORIDA CAPITAL COURIER SERVICES, INC

## **COVER LETTER**

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

SUBJECT: \_\_\_\_

	(PROPOSED CORPO	ORATE NAME – <u>MUST INC</u>	CLUDE SUFFIX)
Enclosed is an original ar	nd one (1) copy of the Arti	icles 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 CO	PY REQUIRED
FROM: _	NCLL/Attn.: Carey Ug Nan 13790 Roosevelt Blvd	ne (Printed or typed)	_

Conway Community Church, Inc.

Clearwater, FL 33762

727-605-0129

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

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

City, State & Zip

Daytime Telephone number

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

ARTICLE I NAT The name of the corp		Community Church	, Inc.	
RTICLE II PR	INCIPAL OFFICE			
Pri	incipal street address:		Mailing address, if different is:	
3	401 Conway Road			
	Orlando, FL 32812			<del></del>
IRTICLE III PUT	URPOSE  ch the corporation is organized is:			
The organization	on is organized exclusively f	for charitable, relig	jious, educational, and so	ientific purpose
including, for s	such purposes, the making o	of distributions to	organizations that qualify	as exempt
organizations	under section 501(c)(3) of the	ne Internal Reven	ue Code, or the correspor	nding section
	ederal tax code.			
or arry rataro is		-		
	ITIAL OFFICERS AND/OR DIREC			_
Name and Title:	Larry Smith - D	Name and Title:	Rick Fry - D	
Address	941 Lake Baldwin Lane	Address:	3401 Conway Road	<del></del>
	Orlando, FL 32814		Orlando, FL 32812	_
Name and Title:	John Voelpel - D	Name and Title:	Alice Dawson - D	
Address	2208 Curry Ford Road	Address:	3401 Conway Road	
	Orlando, FL 32806		Orlando, FL 32812	_
Name and Title:	Thomas W. Turner - D	Name and Title:		2023
Address	PO Box 561315	Address:		_ 는
	Orlando, FL 32856			- N
			·	— <del>**</del>
		_		<del></del>

Name and Title:		Name and Title:		<u></u>
Address		_ Address:		
-				<del></del>
<del></del>				
Name and Title:		Name and Title:	<del></del>	<del></del>
Address				
		. <del>-</del>		
	EGISTERED AGENT ida street address (P.O. Box NOT acce	eptable) of the registe	red agent is:	
Name:	John Voelpel			
Address:	2208 Curry Ford Road			
	Orlando, FL 32806			
ARTICLE VII II The name and addi	NCORPORATOR ress of the Incorporator is:			
Name:	Thomas W. Turner			
Address:	PO Box 561315			
	Orlando, FL 32856			
Effective date, if of (If an effective date in Note: If the date in	her than the date of filing:  the is listed, the date must be specific at a serted in this block does not meet the are date on the Department of State's re-	applicable statutory	than five days prior	
Having been mame	ed as registered agent to accept service with and accept the appointment	e of process for the as registered agent a	above stated corpora nd agree to act in this	tion at the place designated in this capacity  10/24/2027  Date
Solar Danson and not	nent and affirm that the facts stated here State constitutes a third degree felony a	ein are true. I am aw	7.155, F.S.	
	Required Signature of Inco	orporator		10-24-13 Date 2
				~

A ...