

N124000013581

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ MAIL

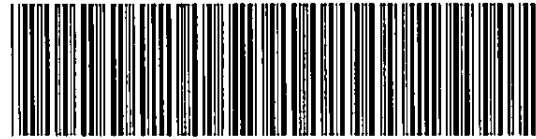
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200439716292

77

2024-10-22

١٠٠

11/25/24--01006--002 7.50

2024 NOV 22 PM 4:41

COVER LETTER

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

SUBJECT: NuSeason Tallahassee Ministries 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

2024 NOV 22 PM 9:47

FILED

FROM: Lynette Nicole Boyd
Name (Printed or typed)

P.O Box 628
Address

Quincy FL 32353
City, State & Zip

(850) 328-7001
Daytime Telephone number

tastetheflavorofnuseason@yahoo.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: NuSeason Tallahassee Ministries Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address:

1747 McKelvey St.
Quincy Fl 32351

Mailing address, if different is:

P.O. Box 628
Quincy FL 32353

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To become a functional non profit religious ministry, to be considered as a non profit agency who has all rights, religious principles and opportunities in florida which include but are not limited to opening banking accounts, filing documents, and other things needed to be fully functional by all laws and bylaws in the state of Florida and or abroad.

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

By Members vote

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Lynette B Hall, ^{FOUNDER}

Address: 1747 McKelvey St.
Quincy Fl 32351

Name and Title: Leonard T. Boyd, ^{BOARD MEMBER}

Address: 18033 Main Street N.
Blountstown FL 32424

Name and Title: Singela M. Dudley, ^{CO-FOUNDER}

Address: Blountstown FL

Name and Title: Derrick S. Laid, ^{BOARD member}

Address: 1747 McKelvey St.
Quincy FL 32351

Name and Title: Geraldine S. Saulsbury, ^{BOARD MEMBER}

Address: 1415 California St.
Tallahassee FL 32304

Name and Title: _____

Address: _____

FILED
2024 JUN 22 PM 3:47

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: Lynette Boyd Hall (Lynette Nicole Boyd)

Address: 1747 McKelvey St.

Quincy FL 32351

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Lynette Boyd Hall (Lynette Nicole Boyd)

Address: 1747 McKelvey St.

Quincy FL 32351

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: November 15, 2024. (OPTIONAL) 11/15/2024

(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

Lynette Boyd Hall (Lynette Nicole Boyd) 11/15/2024
Required Signature of Registered Agent 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.

Lynette Boyd Hall (Lynette Nicole Boyd) 11/15/2024
Required Signature of Incorporator Date

2024 NOV 22 ... 9:47

FILED