

N96000000710

TRANSMITTAL LETTER

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

000001704070  
-02/01/96--01073--004  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

SUBJECT: \_\_\_\_\_

(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

☐ \$122.50  
Filing Fee  
& Certified Copy

☐ \$131.25  
Filing Fee,  
Certified Copy  
& Certificate

FROM: Elder Ernest Jackson  
Name (Printed or typed)

Rt. 3 Box 138  
Address

MAdison, FL 32340  
City, State & Zip

(904) 929-4244 or (904) 973-2419  
Daytime Telephone number

FILED  
96 FEB -9 PM 4:06  
TALLAHASSEE, FLORIDA

FEB 6 1996 BSE

513

W96-2748

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



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morthum  
Secretary of State

February 6, 1996

ELDER EARNEST JACKSON  
RT. 3 BOX 138  
MADISON, FL 32340

SUBJECT: THE CHURCH OF THE APOSTOLIC FAITH  
Ref. Number: W96000002748

We have received your document for THE CHURCH OF THE APOSTOLIC FAITH. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The name of the corporation must contain a corporate suffix. This suffix may be: CORPORATION, CORP., INCORPORATED, or INC. Sections 617.0401(1)(a) and 617.1506(1), Florida Statutes, prohibits the use of the word COMPANY or CO. in the name of a non-profit corporation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6925.

Brenda Baker  
Corporate Specialist

Letter Number: 096A00005140

## ARTICLES OF INCORPORATION

*The undersigned, acting as Incorporator(s) of a corporation pursuant to chapter 617, Florida Statutes, adopt(s) the following Articles of Incorporation:*

### ARTICLE I

#### Name

The name of the corporation shall be: The Church of the Apontolic Faith, Inc.

### ARTICLE II

#### Principal place of business and mailing address

The principal place of business and mailing address of this corporation shall be: 1313 SW Brookwood St.  
Madison, FL 32340

FILED  
36 FEB - 9 PM 4:06  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

### ARTICLE III

#### Purpose(s)

The specific purpose(s) for which the corporation is organized is(are): Non-profit regillious assembly

### ARTICLE IV

#### Manner of election of directors

The manner in which the directors are elected or appointed is as follows: The director of the assembly will be the pastor of the church, and will be stated in the by-laws.

#### ARTICLE V

##### Limitation of corporate powers

The corporate powers of this corporation are as provided in section 617.0302, Florida Statutes, unless limited are as follows: N/A

#### ARTICLE VI

##### Initial registered agent and street address

The name and the street address of the initial registered agent is: Elder Earnest Jackson  
Rt. 3 Box 138  
Madison, FL 32340

#### ARTICLE VII

##### Incorporators

The name(s) and the street address(es) of the incorporator(s) for these articles of incorporation is(are):

Elder Earnest Jackson  
Rt. 3 Box 138  
Madison, FL 32340

The undersigned incorporator has executed these Articles of Incorporation this 30 day of January  
                    , 19 96.

Signature of Incorporator:

Elder Earnest Jackson

Elder Earnest Jackson  
Typed name of incorporator signing

**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 617.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is:

The Church of the Apostolic Faith, Inc.  
(must include suffix)

2. The name and address of the registered agent and office is:

Elder Earnest Jackson  
(NAME)

Rt. 3 Box 138  
(P.O. Box or Mail Drop Box **NOT** ACCEPTABLE)

Madison, FL 32340  
(CITY/STATE/ZIP)

*Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statute relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.*

Eld Earnest Jackson  
(SIGNATURE)

Jan - 30 - 96  
(DATE)

