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(Re	equestor's Name)	<del></del>		
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## **COVER LETTER**

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

SUBJECT:	Ames Christia		Center, In		
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u> U	JDE SUFFIX		
Enclosed are an orig	inal and one (1) copy of the arti	cles 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 of Status		
	ADDITIONAL COPY REQUIRED				
FROM: Name (Printed or typed)					
POBOX 323					
Green: Le FL 3233/ City, State & Zip					
	Daytime Te	728-3236 elephone number	J. can		
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 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME The name of the corporation shall be: AME	s Christian hearning Center I
ARTICLE II PRINCIPAL OFFICE Principal street address	Mailing address, if different is:
JE 319 SW Church Au Greenville FL 323	e POBOX323 Greenville, FL3233
ARTICLE III PURPOSE The purpose for which the corporation is organized is:	provide Childrané services
	SECRETAL SECRETARISES
ARTICLE IV SHARES The number of shares of stock is:	H III I I I I I I I I I I I I I I I I I
Name and Title:	NS President Name and Tille:
Address 4040x33-3 Greenville, FL	Address:
Name and Title:	Name and Title:
Address	
Name and Title:	Name and Title:
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: WATAH	1 HANOS	
Address: 2895	SW Church Hop	Age s
Grocin	11th, H-132331	IN MOVE THE TENT OF THE TENT O
ARTICLE VII INCORPORATOR		25 A
The name and address of the Incorporator is:	_	AM II: 17
Name: WATE	ZONA	REAL TO
Address: PObe(3)	-3,	
Greenville	2, FL3D33	
ARTICLE VIII EFFECTIVE DATE:  Effective date, if other than the date of filing: (If an effective date is listed, the date must be days after the filing.)	(OPTIONAL) e specific and cannot be more than five business d	tays prior or 90 business
. 5,	t meet the applicable statutory filing requirements, that of State's records.	nis date will not be listed as
Having been named as registered agent to accept this certificate, I am familiar with and accept the	ept service of process for the above stated corporations appointment as registered agent and agree to act i	on at the place designated in this capacity
Required Signature/F	Registered Agent	Date
I submit this document and offirm that the fac	cts stated herein are true. I am aware that the falso	e information submitted in a
document to the Department of State constitute.	s a third degree felony as provided for in s.817.155,	F.S.
Required Signature/Incorporator		11-25-13 Date
required Signature/incorporator		Dute