



COMMONWEALTH OF KENTUCKY
ALISON LUNDERGAN GRIMES, SECRETARY OF STATE

Division of Business Filings
Business Filings
 PO Box 718
 Frankfort, KY 40602
 (502) 564-3490
 www.sos.ky.gov

Articles of Incorporation
Non-profit Corporation

NAI

Please note: This form does not comply with 501 (C) status. You should contact the Internal Revenue Service prior to filing the Articles of Incorporation.

Pursuant to KRS 14A and KRS 273, the undersigned applies to qualify and for that purpose submits the following statements:

Article I: The name of the corporation is 12th Street Primitive Baptist Church, Inc

Article II: The purpose for which the corporation is organized Religious Services

Article III: The name of the registered agent is Terry Lee Chambers Sr.

and the street address of the corporation's initial registered office in Kentucky is

<u>2101 West Main Street</u>	<u>Louisville</u>	<u>Kentucky</u>	<u>40212</u>
Street Address (No Post Office Box Numbers)	City	State	Zip Code

Article IV: The mailing address of the corporation's principal office is

<u>2101 West Main Street</u>	<u>Louisville</u>	<u>Kentucky</u>	<u>40212</u>
Street or PO Box Number	City	State	Zip Code

Article V: The number of directors (minimum of three (3) required) constituting the initial board of directors is 3

The names and mailing addresses of the persons who are to serve as the initial board of directors are as follows:

<u>Terry Lee Chambers Sr</u>	<u>2101 West Main Street</u>	<u>Louisville</u>	<u>Kentucky</u>	<u>40212</u>
Name	Street or PO Box Number	City	State	Zip Code
<u>Theodia Johnson</u>	<u>2101 West Main Street</u>	<u>Louisville</u>	<u>Kentucky</u>	<u>40212</u>
Name	Street or PO Box Number	City	State	Zip Code
<u>Andrea Elaine Jackson</u>	<u>2101 West Main Street</u>	<u>Louisville</u>	<u>Kentucky</u>	<u>40212</u>
Name	Street or PO Box Number	City	State	Zip Code

Article VI: The name and mailing address of the incorporator is

<u>Glenn Brown</u>	<u>2101 West Main Street</u>	<u>Louisville</u>	<u>Kentucky</u>	<u>40212</u>
Name	Street Address or Post Office Box Number	City	State	Zip Code
Name	Street Address or Post Office Box Number	City	State	Zip Code
Name	Street Address or Post Office Box Number	City	State	Zip Code

Article VII: This application will be effective upon filing, unless a delayed effective date and/or time is provided. The effective date or the delayed effective date cannot be prior to the date the application is filed. The date and/or time is _____

(Delayed effective date and/or time)

I/We declare under penalty of perjury under the laws of the state of Kentucky that the foregoing is true and correct.

<u>Glenn Brown, Accountant</u>	<u>June 5, 2012</u>
Signature of Incorporator	Print Name & Title Date

I, Terry Lee Chambers Sr, consent to serve as the registered agent on behalf of the corporation.

<u>Terry Lee Chambers Sr</u>	<u>Terry Lee Chambers Sr</u>	<u>June 5, 2012</u>
Print Name of Registered Agent	Print Name & Title	Date
<u>Terry Lee Chambers Sr</u>		
Signature of Registered Agent		