



State of Hawaii
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Nonrefundable Filing Fee: \$25.00

ARTICLES OF INCORPORATION FOR A HAWAII NONPROFIT CORPORATION SOLE

(Section 419-2, Hawaii Revised Statutes)

PLEASE TYPE OR PRINT LEGIBLY IN BLACK INK. Attachments to this form may be used, if necessary.

The undersigned, for the purpose of forming a nonprofit corporation sole under the laws of the State of Hawaii, do hereby make and execute these Articles of Incorporation:

1. **The name of the corporation shall be:**

2. **The name and address of the officer forming the corporation, and the office which the officer holds in the church that the officer is duly authorized by the rules, regulations, or discipline of the church to take the action is:**

First Name

Last Name

Office Title

Country

Address (Number and Street)

Address Line 2 (optional)

City

State

Zip Code

3. **The boundaries of the district subject to the ecclesiastical jurisdiction of the officer forming the corporation sole are in accordance with the rules, regulations, or discipline of the church, as set forth below:**

| | | |
|----|---|---|
| 4. | <p>The place of the principal office of the corporation sole in Hawaii is:</p> <p>Country <input type="text"/></p> <p>Address (Number and Street) <input type="text"/></p> <p>Address Line 2 (optional) <input type="text"/></p> <p>City <input type="text"/> State <input type="text"/> Zip Code <input type="text"/> Hawaii <input type="text"/></p> | <p>If the mailing address of the corporation's principal office differs from the place of the principal office, state the address below:</p> <p>Country <input type="text"/></p> <p>Address (Number and Street) <input type="text"/></p> <p>Address Line 2 (optional) <input type="text"/></p> <p>City <input type="text"/> State <input type="text"/> Zip Code <input type="text"/> Hawaii <input type="text"/></p> |
| 5. | <p>The term for which the corporation sole is organized, which may be perpetual: <input type="text"/></p> | |
| 6. | <p>The manner in which any vacancy occurring in the office of the bishop, chief priest, presiding elder, or presiding officer forming the corporation sole is required to be filled by the rules, regulations, or constitution of the church as set forth below: <input type="text"/></p> | |
| 7. | <p>Additional powers (if any), in accordance with Section 414D-52, HRS, are set forth below: <input type="text"/></p> | |

8. State any lawful provision for the regulation of the affairs of the corporation sole, including restrictions upon the power to amend all or any part of the articles as set forth in Section 419-4, HRS:

9. The corporation is not organized for profit.

I/We certify under the penalties of Section 414D-12, Hawaii Revised Statutes, that I/we have read the above statements, I/we am/are authorized to execute these Articles of Incorporation, and that the above statements are true and correct to the best of my/our knowledge and belief.

Signed this day of , .

Type/Print Name of Officer

Type/Print Name of Officer

Signature of Officer

Signature of Officer

The articles must be signed by the presiding officer of the corporation sole. See FORM SOLE-1-INSTR (instructions).

STATEMENT OF INCUMBENCY

The undersigned certifies under the penalties of the Hawaii Revised Statutes, that I am the incumbent and

_____ of _____
(Office Title) (Name of Corporation Sole)

and that my name and address are stated below:

_____ (Name) _____ (Complete Street Address)

I, the undersigned certify under the penalties of Section 414D-12, Hawaii Revised Statutes, that I have read the above statements and that the above statements are true and correct.

Signed this _____ day of _____, _____.

_____ (Type/Print Name of Incumbent)

_____ (Signature of Incumbent)

CERTIFICATE OF APPOINTMENT

That _____ was appointed by _____
on _____.

The appointment was made in accordance with the rules, regulations, or any lawful provisions of the corporation sole.

I, the undersigned, certify under the penalties of Section 414D-12, Hawaii Revised Statutes, that I have read the above statements and that the above statements are true and correct.

Signed this _____ day of _____, _____.

(Type/Print Name of Appointer)

(Signature of Appointer)