

**N0400000/678**

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

(Business Entity Name)

(Document Number)

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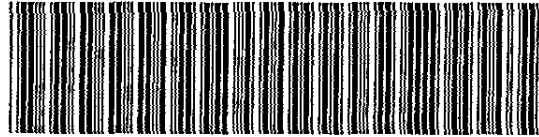
**Bobby Vickers**  
**GAVE**

**AUTHORIZATION BY PHONE TO**

**CORRECT** corp name & principal address

**DATE** 2-18-04

**BY** g



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02/12/04--01049--019 \*\*87.50

FILED  
04 FEB 12 PM 4:45  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

g/18

TRANSMITTAL LETTER

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

*of ocala*

SUBJECT: ~~LOVE FELLOWSHIP CHRISTIAN CENTER~~, *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

FROM: *Elder Bobby Vickers*  
Name (Printed or typed)

*2905 SW 15th St.*  
Address

*Ocala, FL 34474*  
City, State & Zip

*(352) 237-4045*  
Daytime Telephone number

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:

**LOVE FELLOWSHIP CHRISTIAN CENTER OF OCALA, INC.**

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business and mailing address of this corporation shall be:

**2905 SW 15TH ST.  
OCALA, FL. 34474**

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

To congregate in a community bldg. and provide worship services to citizens of the community for non profit.

**ARTICLE IV MANNER OF ELECTION**

The manner in which the directors are elected or appointed:

The directors of this corporation shall be appointed by the founder, Bobby Vickers.

**ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS**

List name(s), address(es) and specific title(s):

Pastor/Elder: Bobby Vickers; 2905 SW 15th St. Ocala, Fl 34474  
Women Minister: Deloris Vickers; 2905 SW 15th St. Ocala, Fl ""  
Youth Minister: Chrissy Vickers; 2905 SW 15th St. Ocala, Fl ""

**ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS**

The name and Florida street address of the registered agent is:

Elder Bobby Vickers-2905 SW 15th St. Ocala, Fl 34474

**ARTICLE VII INCORPORATOR**

The name and address of the incorporator is:

Elder Bobby Vickers-2905 SW 15th St. Ocala, Fl. 34474

\*\*\*\*\*

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.

Bobby Vickers  
Signature/Registered Agent

2-6-04  
Date

Bobby Vickers  
Signature/Incorporator

2-6-04  
Date

FILED  
04 FEB 12 PM 4:45  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA