

NO5000008809

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

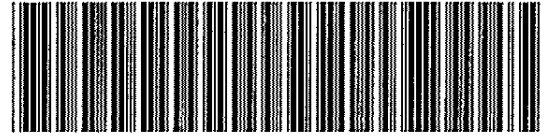
(Business Entity Name)

(Document Number)

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FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
05 AUG 25 AM 10:27

MRS  
8/26

**TRANSMITTAL LETTER**

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

SUBJECT: LOAVES & FISHES <sup>OF</sup> ~~FOR~~ Ecuador, 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: THOMAS J. RISALVATO  
Name (Printed or typed)

PO BOX 2259  
Address

FT. WALTON BEACH, FL 32549  
City, State & Zip

850-244-8395  
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)

FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE I NAME**

The name of the corporation shall be:

LOAVES & FISHES OF ECUADOR, INC

05 AUG 25 AM 10:27

**ARTICLE II PRINCIPAL OFFICE**

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

151 MARY ESTHER BLVD SUITE 301  
MARY ESTHER, FL 32569

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Provide assistance to United Methodist Church in Ecuador

**ARTICLE IV MANNER OF ELECTION**

The manner in which the directors are elected or appointed:

Appointed

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

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

LARRY SEALE 8167 STILLWATER COVE, NAUAREE, FL 32566  
DAN GODWIN 9521 BRENTWOOD BLVD, NAUAREE, FL 32566  
THOMAS RISALVATO, P.O. BOX 2259, FT. WALTON BCH, FL 32549

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

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

THOMAS J. RISALVATO  
151 MARY ESTHER BLVD SUITE 301  
MARY ESTHER, FL 32569

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

THOMAS J. RISALVATO  
P.O. BOX 2259  
FT. WALTON BEACH, FL 32549

\*\*\*\*\*

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.

Thomas J. Risalvato  
Signature/Registered Agent

8-22-05  
Date

Thomas J. Risalvato  
Signature/Incorporator

8-22-05  
Date