

N13000001570

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

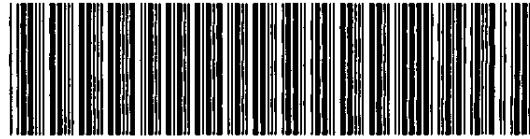
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: Kingdom Concepts ministries: King Jesus Inc./Conceptos Del  
Reino: Rey Jesus 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: Luis King & Tomayra Peña  
Name (Printed or typed)

12319 NW 26th Ct  
Address

Coral Springs FL 33065  
City, State & Zip

954-707-0420  
Daytime Telephone number

vacamosa@bellsouth.net  
E-mail address: (to be used for future annual report notification)

NOTE: Please provide the original and one copy of the articles.



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

February 5, 2013

LUISKING & JOMAYRA PENA  
12319 NW 26TH CT  
CORAL SPRINGS, FL 33065

SUBJECT: KINGDOM CONCEPTS MINISTRIES : KING JESUS INC /  
CONCEPTOS DEL REINO: REY JESUS INC.  
Ref. Number: W13000007007

We have received your document for KINGDOM CONCEPTS MINISTRIES :  
KING JESUS INC / CONCEPTOS DEL REINO: REY JESUS INC. and your  
check(s) totaling \$78.75. However, the enclosed document has not been filed  
and is being returned for the following correction(s):

Please list only one corporate name and remove the other. The English name or  
the Spanish name.

Section 617.0202(d), Florida Statutes, requires the manner in which directors are  
elected or appointed be contained in the articles of incorporation or a statement  
that the method of election of directors is as stated in the bylaws.

Please return the corrected original and one copy of your document, along with a  
copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call  
(850) 245-6052.

Valerie Herring  
Regulatory Specialist II  
New Filing Section

Letter Number: 113A00002782

**ARTICLES OF INCORPORATION**  
In compliance with Chapter 617, F.S., (Not for Profit)

**ARTICLE I NAME**

The name of the corporation shall be: Kingdom Concepts Ministries: King Jesus <sup>LP</sup> INC

**ARTICLE II PRINCIPAL OFFICE**

Principal street address:

Mailing address, if different is:

12319 NW 26th Ct  
Coral Springs FL 33065

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: Religious Services / church

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE IV MANNER OF ELECTION**

The manner in which the directors are elected and appointed: LP The method of election of directors is as stated in the bylaws.

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

Name and Title: Pastor Luishking Peña Name and Title: Pastor Jomayra Peña  
Address: 12319 NW 26th Ct Address: 12319 NW 26th Ct  
Coral Springs FL Coral Springs FL  
33065 33065

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_ Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_ Address: \_\_\_\_\_  
\_\_\_\_\_  
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Name and Title: \_\_\_\_\_ Name and Title: FILED  
Address: \_\_\_\_\_ Address: 13 FEB 14 AM 2:15  
\_\_\_\_\_  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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: ~~Luising~~ <sup>2P.</sup> ~~Peña~~ Jomayra Peña  
Address: 12319 NW 26th Ct  
Coral Springs, FL 33065

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Luising Peña  
Address: 12319 NW 26th Ct  
Coral Springs FL 33065

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

Jomayra Peña Required Signature of Registered Agent 1/29/13 Date

I submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

[Signature] Required Signature of Incorporator 1/29/13 Date