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FLORIDA DEPARTMENT OF STATE JUSTION OF CORPORATIONS Division of Corporations

July 19, 2011

ALBINO SIMON 14736 COUNTY ROAD 250 LIVE OAK, FL 32060

SUBJECT: IGLESIA PENTECOSTES

Ref. Number: W11000037920

We have received your document for IGLESIA PENTECOSTES and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name must contain a word that will clearly indicate that it is a corporation. This word may be: CORPORATION, CORP., INCORPORATED, or INC. Sections 617.0401(1)(a) and 617.1506(1), Florida Statutes, prohibits the use of the word COMPANY or CO. in the name of a non-profit corporation.

Please return 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) 245-6901.

Pamela Smith Regulatory Specialist II

Letter Number: 511A00017099

Office 386-362-2212 Fax 386-362-2240

CANCIO & ROMAGNOLO, P.A. Attorneys at Law

P.O. Box 6051 Live Oak, Florida 3206

August 3, 2011

Ms. Pamela Smith Regulatory Specialist II Florida Dept. of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

RE:

Subject:

Iglesia Pentecostes, Inc.

Reference #: W11000037920

Dear Ms. Smith:

Per your request of July 19, 2011, (copy enclosed), please find revised Articles of Incorporation reflecting the corporation's name as Iglesia Penetecostes, Inc..

If any additional information is needed, please feel free to contact me.

Sincerely,

Angela M. Cancio, Esq.

AMC/djh

Enclosure: As stated

COVER LETTER

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

SUBJECT: IGLESIAS PENTECOSTES					
(PROPOSED CORPORATE NAME – <u>MUST INCLUDE SUFFIX</u>)					
Enclosed is an original and one (1) copy of the Articles of Incorporation and a check for:					
\$70.00 Filing Fee & Certificate of Status \$78.75 Filing Fee & Certificate Of & Certificate Copy & Certifica					
ADDITIONAL COPY REQUIRE	<u>, </u>				
•					
FROM: ALBINO SIMON					
Name (Printed or typed)					
14736 COUNTY ROAD 250 Address					
LIVE OAK, FLORIDA 32060 City, State & Zip					
843 Pinewood Drive SW LIVE OCK, 1842 PINEWOODD PRICE PLANE NUMBER TEL: 904 303-4952	Z 32060				
E-mail address: (to be used for future annual report notification)					

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 II PRINCIPAL OFFICE Principal street address Star Only Control of the corporation shall be: ARTICLE II PRINCIPAL OFFICE Principal street address Star Only Only Only Only Only Only Only Only	• '	in compliance with chapter	017, 1.3., (1401	F 41 P= 44
Mailing address; first firstern its: 473 COUNTY ROAD 250 LIVE OAK, FLORIDA 32084 ARTICLE III PURPOSE The purpose for which the corporation is organized is: ANY AND ALL LAWFUL BUSINESS RELATION TO THE PROMOTION OF Pentra COSTAL RELIGION The manner in which the directors are elected and appointed: VOTE ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS Name and Title: ALBINO SIMON Address: B43 PINEWOOD DRIVE SW LIVE OAK, FLORIDA 32084 Name and Title: CAMILO CALIXTO Name and Title: CAMILO CALIXTO Name and Title: ROBERTO ROMULO Address: B43 PINEWOOD DRIVE SW LIVE OAK, FLORIDA 32064 Name and Title: ROBERTO ROMULO Name and Title: ROBERTO ROMULO Address: B43 PINEWOOD DRIVE SW LIVE OAK, FLORIDA 32064 Address: B43 PINEWOOD DRIVE SW LIVE OAK, FLORIDA 32064 Address: B43 PINEWOOD DRIVE SW LIVE OAK, FLORIDA 32064 Address: B43 PINEWOOD DRIVE SW LIVE OAK, FLORIDA 32064 Address: B43 PINEWOOD DRIVE SW LIVE OAK, FLORIDA 32064 ARTICLE VI REGISTERED AGENT The pame and Bordia street address (P.O. Box NOT acceptable) of the registered agent is: Name: ALBINO SIMON Address: B43 PINEWOOD DRIVE SW LIVE OAK, FLORIDA 32064 Having been named as registered agent to accept service of process for the above stated corporation at the place designated in the certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity ARTICLE VII INCOPORATOR The pame and address of the Incorporator is: Name: ALBINO SIMON Address: B43 PINEWOOD DRIVE SW LIVE OAK, FLORIDA 32064 Having been named as registered agent to accept the appointment as registered agent and agree to act in this capacity ARTICLE VII INCOPORATOR The pame and address of the Incorporator is: Name: ALBINO SIMON Address: B43 PINEWOOD DRIVE SW LIVE OAK, FLORIDA 32064 Having been named as registered agent to accept the appointment as registered agent and agree to act in this capacity ARTICLE VII INCOPORATOR Required Signature of Registered Agent I submit this document and affirm that the facts stated therei			ES INC.	DIVISION OF CORPORATIONS
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