

TRANSMITTAL LETTER

*NO1000002634*

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

01 APR -9 AM 10:59

DEPT. OF STATE  
TALLAHASSEE, FLORIDA

SUBJECT: NAZARENE HISPANIC CHAPLAINS ASSOCIATION, INC.  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

700003972597--6  
-04/09/01--01081--019  
\*\*\*\*\*87.50 \*\*\*\*\*87.50

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: NAZARENE HISPANIC CHAPLAINS ASSOCIATION, INC.  
Name (Printed or typed)

5902 N. HIMES AVE.

Address

TAMPA, FL. 33614

City, State & Zip

(813) 872-9112

Daytime Telephone number

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

D. BROWN APR 13 2001 ✓

# ARTICLES OF INCORPORATION

In Compliance with Chapter 617, F.S.. (Not for Profit)

## ARTICLE I NAME

The name of the corporation shall be:

NAZARENE HISPANIC CHAPLAINS ASSOCIATION, INC.

## ARTICLE II PRINCIPAL OFFICE

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

5902 N. HIMES AVE.  
TAMPA, FL. 33614

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

CHAPLAINS SERVICES IN ORDER TO GIVE HELP AND SUPPORT BY COUNSELLING AND  
COMPASSION MINISTRIES TO THE PUBLIC IN GENERAL.

## ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:

ON YEARLY BASIC

## ARTICLE V INITIAL DIRECTORS/OFFICERS

The name and addresses:

REV. J. EDGAR DIAZ 4417 W. KNOLLWOOD ST. TAMPA, FL. 33614  
ENG. ARAMIS ALVAREZ, 16615 PALM ROYAL DR. #317 TAMPA, FL. 33647  
NANCY ANN CORTES, 4417 W. KNOLLWOOD ST. TAMPA, FL. 33614

## ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

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

ELADIO HERRERA, 6411 N. ARMENIA AVE. APT. 101 TAMPA, FL. 33604

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

REV, J. EDGAR DIAZ, 5902 N. HIMES AVE. TAMPA, FL. 33614

\*\*\*\*\*  
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.



Signature/Registered Agent

03-30-01

Date



Signature/Incorporator

03-30-01

Date