

Enclosed is an origina	al and one(1)	) copy of the	articles of inc	corporation 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: Pastor Angel Vohiusow Name (Printed or typed)	5000058559159 -06/19/0201023008 *****87.50 ******87.50
6252 Sparling Hill's Cir.	,
Orlando, Morida 3280 City, State & Zip	<u>8</u>
Home #(407)291-7721  Davine Telephone number	
NOTE: Please provide the original and one cop	y of the articles. SECRETARY LLAHASSE
09	9 PH 1: 10 YOF STATE FEE FLORIDA

### **Articles Of Incorporation**

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

O2 JUL 19 PM 1: 14
SECRETARY OF SIANT TALLAHASSEE FLORE

#### Article I (Name)

The name of Corporation shall be: Emmanuel Lighthouse Of Deliverance Ministry, Inc.

### Article II (Principal Office)

The principal place of business and mailing address of this corporation shall be: 6252 Sparling Hill's Cir. Orlando, Florida 32808

### Article III (Purpose(s)

The purpose of Emmanuel Lighthouse Of Deliverance Ministry, Inc. is to serve as an, Entity that will provide an environment that will allow for the enhancement of the quality of life for the individuals seeking spiritual guidance. This will be accomplished by offering a weekly assembly for devotional services.

### Article IV (Manner of Election of Directors)

The manner in which the directors are elected or appointed are contained in the Bylaws of said Corporation.

## Article V (Name and address of Registered Agent are:)

Rose Mary Gregory 414 Cypress, Av. Sanford, Florida 32771

# Article VI (Name and address of the Incorporator to these Articles of Incorporation are:)

Senior Pastor Angel Johnson P.O Box 371

P.O DOX 371

Clarcona, Florida 32898

Signature/Incorporator

Having been named as registered agent and to accept service of process for the above stated, corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent.

Signature/Registered Agent

Date