

V04 0000 11755

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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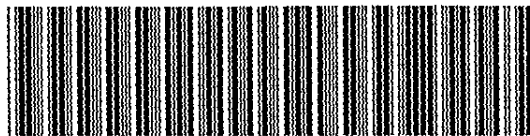
(Business Entity Name)

(Document Number)

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

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## TRANSMITTAL LETTER

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

**SUBJECT:** COVENANT LIFE FELLOWSHIP OF CUTLER RIDGE, 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:** REV. NORMAN S. SPENCER

Name (Printed or typed)

18801 BELVIEW DRIVE

Address

MIAMI FL 33157

City, State & Zip

305/256-9731 OFFICE 305/297-3604 CELLULAR

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)

## **ARTICLE I NAME**

The name of the corporation shall be:

COVENANT LIFE FELLOWSHIP OF CUTLER RIDGE, INC.

## **ARTICLE II PRINCIPAL OFFICE**

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

18801 BELVIEW DRIVE  
MIAMI FL 33157

## **ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

CHURCH AND MINISTRY RELATED ACTIVITIES

## **ARTICLE IV MANNER OF ELECTION**

The manner in which the directors are elected or appointed:

ELECTED BY MAJORITY OF MEMBERSHIP

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

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

REV. NORMAN S. SPENCER, PASTOR/PRESIDENT, 18801 BELVIEW DR. MIAMI FL 33157  
REV. MARGARITA SPENCER, SECRETARY, 18801 BELVIEW DR. MIAMI FL 33157  
CHRISTOPHER S. NOWAK, TREASURER, 18810 BELMONT DR. MIAMI FL 33157  
REV. IRIS J. REISMAN, DIRECTOR, 9865 SW 34 TERR. MIAMI FL 33165  
REV. KEVIN McANULTY, DIRECTOR, 472 RED ROBIN LA. POPLAR BLUFF, MO 63901

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

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

REV. NORMAN S. SPENCER, PASTOR/PRESIDENT, 18801 BELVIEW DR. MIAMI FL 33157

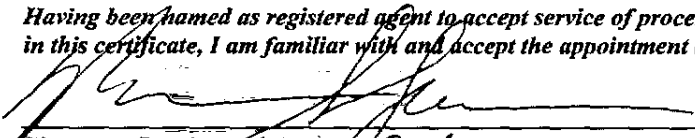
## **ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

REV. NORMAN S. SPENCER, PASTOR/PRESIDENT, 18801 BELVIEW DR. MIAMI FL 33157

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*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

12-14-04  
\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Signature/Incorporator

12-14-04  
\_\_\_\_\_  
Date

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA