

N 05000002034

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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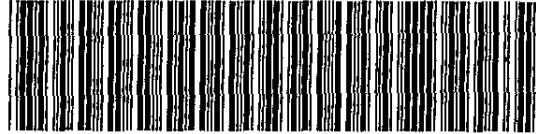
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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STATE
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TRANSMITTAL LETTER

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

SUBJECT: NEW JERUSALEM FELLOWSHIP, 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: PASTOR BIEN-AIME RAYMONVIL
Name (Printed or typed)

753 NW 125 STREET
Address

MIAMI FL 33168
City, State & Zip

786-663-9661 / 786-663-5905
Daytime Telephone number

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

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

ARTICLE I NAME

The name of the corporation shall be: **NEW JERUSALEM FELLOWSHIP, INC.**

ARTICLE II PRINCIPAL OFFICE

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

753 NW 145 STREET MIAMI FL. 33168

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: **FELLOWSHIP and WORSHIP GOD**

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed: **THRU ORDAINMENT WITH MINISTERIAL AUTHORITY.**

ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS

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

MARIE N. RAYMOVIL, DIRECTOR 753 NW 145 STREET MIAMI FL 33168
PAUL FRANCOIS OFFICER 16450 MIAMI DRIVE APT. 404 NMB FL. 33162
SAINT-JULIEN SAINT-HILAIRE OFFICER 740 NE 165 STREET MIAMI FL. 33162

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

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

PASTOR BIEN-AIME RAYMONVIL
753 NW 145 STREET MIAMI FL. 33168

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

PASTOR BIEN-AIME RAYMONVIL
753 NW 145 STREET MIAMI FL 33168

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.

x **BIEN-AIME RAYMONVIL**
Signature/Registered Agent **PASTOR BIEN-AIME RAYMONVIL**

02-17-05
Date

x **BIEN-AIME RAYMONVIL**
Signature/Incorporator **PASTOR BIEN-AIME RAYMONVIL**

02-17-05
Date

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