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Certified Copies	_ Certificates	of Status
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SECRETARY OF STALE STAIR OF CORPORATIONS

10 7200

TRANSMITTAL LETTER

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

SUBJECT: LIFE TABERNACIE WORSHIP CENTER

Enclosed is an original and one(1) copy of the Articles of Incorporation and a check for:

\$70.00

\$78.75

□\$78.75 Filing Fee \$87.50

Filing Fee &

Certificate of & Certified Copy Status

Filing Fee,
Certified Copy

& Certificate

ADDITIONAL COPY REQUIRED

FROM: JENNIFER KNIGHT
Name (Printed or typed)

4780 N. W. 73RO AVE.

LANDERHILL, FL. 33319 City, State & Zip

(954) 747-8643 Daytime Telephone number

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

05 APR 12 PM 1: 31

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

The name of the corporation	on shall be:		1	- A -
LIFE TH	BERNAC/E	WORSHIP	CENTE	
ARTICLE II PRINCI				·
4780 N.W.		s corporation shall be.		
parderhiel	, FL. 33319			
	corporation is organized is:			1
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	DRUG RE	HAB) HINI	STRY TO	Home
ARTICLE IV MANN The manner in which the d	ER OF ELECTION irectors are elected or appointe	HAB) HINI.	WNGRY.	
	BY PRESIDE.	ATT AND TO	ver mem	KEO C
RIECTED	by preside.	of prop on		، حصور
ARTICLE V INITIAL	DIRECTORS AND/OR OF	FICERS	- // -	-1 ==== (
List name(s), address(es) a	nd specific title(s):	THERER POMPO	no Bch. F	L. 530 €
Treas. Dela	are Kright	7315 NW 485T	Lauderhu	33319
ARTICLE V INITIAL List name(s), address(es) a List name(s), address(es) a	14-4780 NW 7	300 live, Lave	S.C. 2990	, , , , , , , , , , , , , , , , , , ,
OIR. DOUGH STEWAR OIR ARMICLE HE INITIA	T // COPEN CARP PRESTERED AGENT	S. ISHI CT. FT.	and Flo	33311
The name and Florida str	eet address (P.O. Box NOT a	cceptable) of the registered at	gent is:	
JENNIFER K	NIGHT SEN AUF.		$\frac{2}{5}$	무A C
Laudorhill,	CL 33319	,	2	125 E
ARTICLE VII INCOME The name and address of			<u>- س</u> - د ي	
HOYD BARR		Park BOH	F1 3300	
1851 NW 7	H TERRACE, I	om PANO BCH,	. 	
	**************************************			** :ted
in this certificate, I am familiar	with and accept the appointment of	as registered agent and agree to	act in this capacity.	
Signature/Registered Agent	ight		1/18/05	
orginature/registered Agent	<u>U</u>	Date	. / . /	•
Complete L		Data	1/18/05	
/Janure/Incorporator	,	- Kanana man		