# NO6000010158

(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						
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SECRETARY OF STATE
ALLAHASSEF, FIGRIDA

J. Shiners SEP 58 5000,

## **COVER LETTER**

### **ENGLISH**

"PICKING UP THE LAST HARVEST"
FEDERAL CHAPLAIN MINISTRY

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

### **SPANISH**

MINISTERIO DE CAPELLAN FEDERAL
"RECOJIENDO LA ULTIMA COSECHA"

SUBJECT:												
•	ſ	PROPO	SED (	CORPO	RAT	E NAN	ИE - I	MUST	INCL	UDE	SUF	FIX)

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

Filing Fee	Filing Fee & Certificate of Status	Filing Fee & Certified Copy	Filing Fee, Certified Copy & Certificate		
	,	PY REQUIRED			
FROM			FIL 06 SEP 27 SECRETAR TALLAHASS		
	10310 ZACKARY CIR		PM .E.		
	RIVERVIEW, FLORIDA	idress A 33569	D 12: 29 STATE FLORIDA		
	City, S (813) 383- 1590 - OFF	tate & Zip ICE	_		
	(813) 841- 7514 - CEL				
	Daytime Tel	ephone 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)

ARTI	CLE	I	NAME
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The name of the corporation shall be:

THE LAST HARVEST

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

10310 ZACKARY CIRCLE APT- 54

RIVERVIEW, FLORIDA 33569

ARTICLE III PURPOSE

The purpose for which the corporation is organiEQRiVISITING PENAL OR CORRECTIONAL INSTITUTIONS. HOSPITALS, REHABILITATION PROGRAMS, GIVING CONSSELING AND PRAYING AND WORKING VOLUNTARY WITH THE COMMUNITY ALL AROUND THE WORLD. PREACHING THE WORD OF GOD. BAPTIZED. FUNERAL SERVICES, CONSSELING. GIVING MARRIAGE, VISITING PEOPLE WITH NEEDS, HELPING VOLUNTARY IN NATURAL DESASTERS WITH THE FIRE DEPT, SHERIFF DEPT, POLICE DEPT, C.D. DEPT, RED CROSS DEPT, SALVATION ARMY DEPT, MANNER OF ELECTRON OF THE FAMILY, AND OTHERS GOVERNMENTS DEPT. The manner in which the directors are elected or appointed:

THEY WILL BE APOINTED IN MANNER VOLUNTARY BASIS.

### ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS

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

NORBERT. PADILLA & CARMEN M. RODRIGUEZ 10310 ZACKARY CIRCLE APT- 54

RIVERVIEW, FLORIDA 33569

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

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

10310 ZACKARY CIRCLE APT- 54 RIVERVIEW, FLORIDA 33569

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is: NORBERT. PADILLA

10310 ZACKARY CIRCLE APT- 54

RIVERVIEW, FLORIDA 33569

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.

tered Agent

Signature/Incorporator

12/2006