

NO7000002801

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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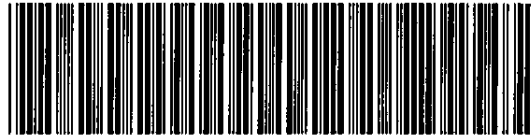
(Business Entity Name)

(Document Number)

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02/27/07--01021--023 **78.75

07 MAR 19 PM 12:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED

W07-9933

B. McKnight MAR 19 2007

COVER LETTER

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

SUBJECT: FULL REVIVAL Church Assembly of God
(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: PAULA MALDONADO
Name (Printed or typed)

1818 CROSSROAD BLVD
Address

WINTER HAVEN FL 33881
City, State & Zip

863-324-7938
Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 27, 2007

PAULA MALDONADO
1818 CROSSROAD BLVD
WINTER HAVEN, FL 33881

SUBJECT: FULL REVIVAL CHURCH ASSEMBLY OF GOD
Ref. Number: W07000009933

We have received your document for FULL REVIVAL CHURCH ASSEMBLY OF GOD and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of the corporation must contain a corporate suffix. This suffix may be: CORPORATION, CORP., INCORPORATED, or INC. Sections 617.0401(1)(a) and 617.1506(1), Florida Statutes, prohibits the use of the word COMPANY or CO. in the name of a non-profit corporation.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6931.

Becky McKnight
Document Specialist
New Filing Section

Letter Number: 607A00014163

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

ARTICLE I NAME

The name of the corporation shall be: *FULL REVIVAL Church Assembly of God
CORP*

ARTICLE II PRINCIPAL OFFICE

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

*1818 CROSSROAD BLVD
WINTER HAVEN FL 33881*

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Church: Religious Purposes

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:

*APPOINTED By The President and The Regional
OVERSEE*

ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS

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

- ① *JEFFERSON NETTO - 701 BROADWAY, EVERETT, MA 02119. President*
- ② *MOISES MENDES DA SILVA. 6412 Queens Borough AVE APT#310 ORLANDO FL 32835-
DIRECTOR and Regional OVERSEE.*
- ③ *PAULA MALDONADO. 1818 CROSSROAD BLVD WINTER HAVEN FL- 33881*

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

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

PAULA MALDONADO- 1818 CROSSROAD BLVD WINTER HAVEN FL 33881

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

*MOISES MENDES DA SILVA
6412 Queens Borough AVE APT#310 ORLANDO FL 32835-*

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]

Signature/Registered Agent

02-13-2007

Date

[Signature]

Signature/Incorporator

02-13-2007

Date

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

07 MAR 19 PM 12:01

APPROVED
AND
FILED