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SECRETARY OF STAT

COVER LETTER

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

SUBJECT: L'Eglise Baptiste Eben Ezer, Inc.				
	(PROPOSED CORPORATI	E NAME – <u>MUST INCLU</u>	DE 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 CO	PY REQUIRED	
FROM:	Wilgains Fleuridor Name (Prin	ted or typed)		
5416 Holtland Dr. Address				
Apopka, FL 32712 City, State & Zip				
	407-920-6201			

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

Daytime Telephone number

'ARTICLES OF INCORPORATION

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

•	
ARTICLE I NAME The name of the corporation shall be:	
•	
L'Eglise Baptiste Eben Ezer, Inc.	07 MAY -2 PM 4: 56
ARTICLE II PRINCIPAL OFFICE	SECRETARY OF STATE
The principal place of business and mailing address of this corporation shall be:	TALLAHASSEE FLORIDA
4490 Rock Springs Rd, Apopka, FL 32712 P.O. Box 1467, Apopka, FL 32704	
ARTICLE III PURPOSE The purpose for which the corporation is organized is:	
The organization is organized to meet the spiritual needs of the Haitian In case of dissolution, the organization assets will go to the community government.	
ARTICLE IV MANNER OF ELECTION	
The manner in which the directors are elected or appointed:	189 1 1 11 1
The initial directors or the church board are selected by the pastor and members	rarified by the church
ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS List name(s), address(es) and specific title(s):	
Wilgains Fleuridor, Ph.D., pastor, 5416 Holtland Dr., Apopka, FL 32712 Mona Jean-Baptiste, treasurer, 1165 monteagle Cir., apopka, FL 32712 Joseph Fadael, secretary, 5416 Holtland Dr. Apopka, FL 32712 Lucienne Alcine, member, 250 Morning Creek Cir., Apopka, FL 32712	2
ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRES The name and Florida street address (P.O. Box NOT acceptable) of the registered and Elevision Street address (P.O. Box NOT acceptable) of the registered and Elevision Street address (P.O. Box NOT acceptable) of the registered and Elevision Street address (P.O. Box NOT acceptable) of the registered and Elevision Street address (P.O. Box NOT acceptable) of the registered and Elevision Street address (P.O. Box NOT acceptable) of the registered and Elevision Street address (P.O. Box NOT acceptable) of the registered and Elevision Street address (P.O. Box NOT acceptable) of the registered and Elevision Street address (P.O. Box NOT acceptable) and Elevision Street address (P.O. Box NOT acceptable) of the registered and Elevision Street address (P.O. Box NOT acceptable) and Ele	
ARTICLE VII INCORPORATOR	
The <u>name and address</u> of the Incorporator is: Dr. Wilgains Fleuridor	
5416 Holtland Dr.	
Apopka, FL 32712	

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.

Od-25-07

Signature/Registered Agent

Date

Od-25-07

Date