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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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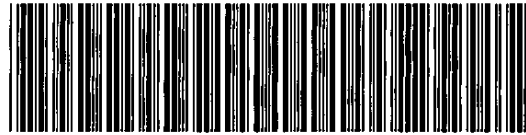
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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07 AUG 31 PM 4:58  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

8/31/07

## COVER LETTER

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

SUBJECT: Iglesia Cristiana de Restauración Elohim 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 Efren Torres  
Name (Printed or typed)

7702 Rivergate Dr. Apt # 224  
Address

Tampa, FL 33619  
City, State & Zip

(813) 850-4394  
Daytime Telephone 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)

**ARTICLE I NAME**

The name of the corporation shall be:

Iglesia Cristiana de Restauracion Elohim Inc.

**ARTICLE II PRINCIPAL OFFICE**

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

7702 Rivergate Dr. Apt. # 224 Tampa, Fl. 33619

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Preaching the gospel of JesusChrist, savings souls, being a benefit to the community with the meaning of Section 501 (c) (3) of the Internal Revenue code.

**ARTICLE IV MANNER OF ELECTION**

The manner in which the directors are elected or appointed:

Appointed yearly by Pastor Jose G. Moreno

**ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS**

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

Efren Torres (President - Pastor) 7702 Rivergate Dr. Apt 224 Tampa, Fl. 33619  
Cecilio Galarza (Treasure) 7416 Manchester Ln. Tampa, Fl. 33619  
Nancy Velazquez ( Secretary) 7702 Rivergate Dr. Apt. 224 Tampa, Fl. 33619

**ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS**

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

Efren Torres 7702 Rivergate Dr. Apt. #224 Tampa, Fl. 33619

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Efren Torres 7702 Rivergate Dr. Apt. # 224 Tampa, Fl. 33619

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\*\*\*\*\*  
*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/Registered Agent

*Efren Torres*

\_\_\_\_\_  
Date

*8-28-04*

\_\_\_\_\_  
Signature/Incorporator

*Efren Torres*

\_\_\_\_\_  
Date

*8-28-04*