

N 08000009868

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

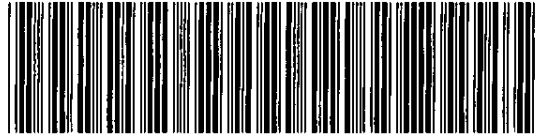
(Business Entity Name)

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**COVER LETTER**

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DIVISION OF CORPORATIONS

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

**SUBJECT:** Lehigh Acres Church of God - Harvest Ministries, 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:** Lehigh Acres Church of God - Harvest Ministries, Inc.  
Name (Printed or typed)

200 Lee Boulevard  
Address

Lehigh Acres, FL 33936  
City, State & Zip

239-369-1094  
Daytime Telephone number

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

