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PICK-UP	□ w	AIT	MAIL	
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Certified Copies	Cert	ificates of	Status	
Special Instructions	to Filing Offic	er:		
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DEPARTHENT OF STATE PORATIONS 2009 JUN 30 AN IO: 55

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## **COVER LETTER**

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

SUBJECT:							
(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)							
Enclosed is an original	and one (1) copy of the Articl	es of Incorporation and	a check for:	1			
\$70.00	\$78.75	<b>\$78.75</b>	<b>\$87.50</b>				
Filing Fee	Filing Fee &	Filing Fee	Filing Fee,				
· ·	Certificate of	& Certified Copy	Certified Copy				
	Status		& Certificate	·			
	ADDITIONAL COPY REQUIRED						
	ADDITIONAL COFF REQUIRED						
L Del Merance							
FROM: Halth International Outreach Monoby INC							
Name (Printed or typed)							
PARALIZA VICE SLOTE							
Address Tallahassee Cl.							
Mill Distriction of the Massee CI.							
Minton (1 - 3231)							
City, State & Zip							
257-251-27511							
Daytime Telephone number							
Daytine Telephone number							

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

E-mail address: (to be used for future annual report notification)

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

ARTICLE I NAME  The name of the corporation shall be:	
Faith Del Novana International	NILLIAMICA MAS
ARTICLE II PRINCIPAL OFFICE	butreach Winisty Inc.
The principal <u>street</u> address and mailing address, if different is:	1-01/
D.O.BOX441 -1	139 Kissimmee Stra
Midway DI. 32343	allahassee Pl.
The purpose for which the corporation is organized is:	32310
Outreach Ministry	30.0.0
	ACE OS
ARTICLE IV MANNER OF ELECTION	FIL AHASSE
The manner in which the directors are elected or appointed:	130 130 138:
Secretary As stated in the by laws	me s m
Tresure.	E SH E CO
ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS	20 ANE
List name(s), address(es) and specific title(s):	11 Fr. 20343
Luther Albert / Tresury, 175 S: Notwill Rd. M	1 E/ 2025
Carmetre Moure/Secretary 171 Silvohill Rd M	
Carolyn Albert / Pastor, 175 S: Nobell Nd. Midwa	y, FC 30343
The name and Florida street address (P.O. Box NOT acceptable) of t	
Corolyn E. Albert	ne registered agent is.
175 shooted Rd.	
ARTICLE VII INCORPORATOR Article VIII Effe	che Dale
The name and address of the Incorporator is: 6/29/09	
Carolyn E. Albert	
175 5: NAVII Rd.	
M:Luxy, F1. 32343 **********************************	
Having been named as registered agent to accept service of process for the above Mathis certificate, I am familiar with and accept the appointment as registered ag	
MARIAN) (XIIII)	10/20/03
Signature/Registered Agent,	Date
Marian ///	11/2/10
Signature/Incorporator	<u>U 30 / 7</u>
\\	Date