

N10000000549

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entry Name)

(Document Number)

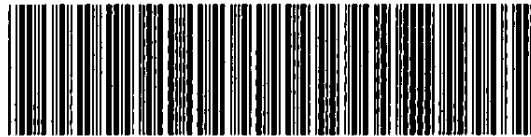
Certified Copies _____ Certificates of Status _____

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customer request.*

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10 JAN 19 PM 3:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1-20-10 *AK*

COVER LETTER

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

SUBJECT: HOUSE OF WORSHIP
(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: FT. PIERCE HAITIAN UNITED METHODIST CH
Name (Printed or typed)

PO BOX 2671
Address

FORT PIERCE, FL 34954
City, State & Zip

772-940-6728
Daytime Telephone number

e_duclona@yahoo.com
E-mail address: (to be used for future annual report notification)

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:

FORT PIERCE HAITIAN UNITED METHODIST CHURCH *Corporation*

ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is:

735 ORANGE AVE
FORT PIERCE, FL 34950

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

HOUSE OF WORSHIP

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:

BY THE LOCAL CHURCH NOMINATION COMMITTEE

ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS

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

ESQUIBEL DUCLONA, 705 OSCEOLA AVE, FORT PIERCE, FL 34982 (SECRETARY
JOANES MARTIN, 1798 SE FLORESTA DR, PORT SAINT LUCIE, FL 34983

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

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

JOANES MARTIN, 1798 SE FLORESTA DR, PORT SAINT LUCIE, FL 34983

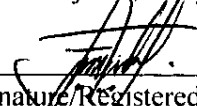
ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

ESQUIBEL DUCLONA
705 OSCEOLA AVE
FORT PIERCE, FL 34982

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA


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

1/14/10

Date



Signature/Incorporator

1/14/10

Date