



COVER LETTER

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

SUBJECT: THE WELL-ORLANDO, 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: MICHAEL OGRODY  
Name (Printed or typed)

119 HOLLY CT.  
Address

MAITLAND, FL 32751  
City, State & Zip

407 782 3565  
Daytime Telephone number

MICHAELOGRODY@AOL.COM  
E-mail address: (to be used for future annual report notification)

2010 AUG 20 PM 3:51  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

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

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

MAR 60  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

2010 AUG 20 PM 3:51

**ARTICLE I NAME**

The name of the corporation shall be:

*THE WELL-ORLANDO, INC.*

**ARTICLE II PRINCIPAL OFFICE**

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

*741 DIXIE PARKWAY, WINTER PARK, FL. 32789*

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

*A COMMUNITY OF BELIEVERS, THE BODY OF CHRIST, WORSHIPPING OUR HEAVENLY FATHER, THE LORD JESUS CHRIST AND BRINGING PEOPLE INTO FELLOWSHIP TO CARRY OUT THE WILL OF GOD.*

**ARTICLE IV MANNER OF ELECTION**

The manner in which the directors are elected or appointed:

*APPOINTED BY OUR COMMUNITY.*

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

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

*SEE ATTACHED*

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

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


*JOHN R CASEBIER  
741 DIXIE PARKWAY, WINTER PARK, FL. 32789*

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

*MICHAEL J. OGRODY  
119 HOLLIE CT, MAITLAND, FL 32751  
PHONE 407-782-3565*

\*\*\*\*\*  
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

8/10/10  
Date

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

8/17/10  
Date

**THE WELL-ORLANDO, INC  
DIRECTORS.**

**Michael J. OGrody  
119 Hollie Court  
Maitland, Fl. 32751**

**Catharine G. OGrody  
119 Hollie Court  
Maitland, Fl. 32751**

**John R Casebier  
741 Dixie Parkway  
Winter Park, Fl 32789**

**Jennifer Casebier  
741 Dixie Parkway  
Winter Park, Fl. 32789**

**David Barefoot  
240 Columbus Circle  
Longwood, Fl 32750**

**David Paul  
3117 Edgewater Dr.  
Orlando, Fl 32804**

**Joy Mauger  
709 Warrenton Road  
Winter Park, Fl 32792**