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(Requestor's Name)

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(City/State/Zip/Phone #)

☐ PICK-UP    ☐ WAIT    ☐ MAIL

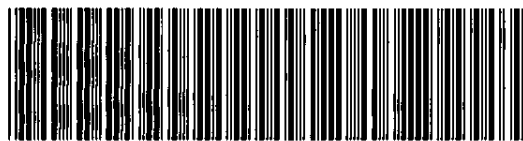
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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AND  
FILED

1/11

## COVER LETTER

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

SUBJECT: Ministerio Monte Moriah, 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: Rev. Gustavo Zuñiga  
Name (Printed or typed)

8536 -200ST  
Address

Mcalpin, Florida 32062  
City, State & Zip

386-364-4598  
Telephone number

jesus54272@windstream.net  
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: Ministerio Monte Moriah, Inc

**ARTICLE II PRINCIPAL OFFICE**

Principal street address  
8536 200St  
Mcalpin, Florida 32062

Mailing address, if different is:  
P.O.Box 373  
O'brien, Florida 32071

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

To preach, teach and help the hungry and needy to reach Salvation in Jesus name, also a Special program to help teaching them how to cope with alcohol dependency.

**ARTICLE IV MANNER OF ELECTION** The manner in which the directors are elected and appointed:

The members are elected by the congregation

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

Name and Title: Rev. Gustavo Zuñiga: President  
Address: 8536 200 ST  
Mcalpin, Florida 32062

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_

Name and Title: Rev. Fabia Zuñiga: Vice President  
Address: 8536 200 ST  
Mcalpin, Florida 32062

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_

Name and Title: Jose Licea: Treasurer  
Address: 8536 200 St  
Mcalpin, Florida 32062

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

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

Name: Rev. Gustavo Zuñiga  
Address: 8536 200 St  
Mcalpin, Florida 32062

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Rev. Gustavo Zuñiga  
Address: Same as above  
8536 200 St  
Mcalpin, Florida 32062

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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AND  
FILED

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]  
Required Signature of Registered Agent

10-28-2010  
Date

I submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

[Signature]  
Required Signature of Incorporator

10-28-2010  
Date