

N 1000000/0386

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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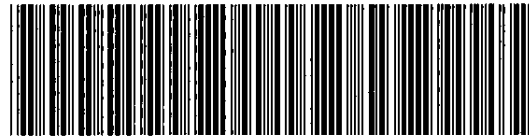
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

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COVER LETTER

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

SUBJECT: Church "The Message of the Cross", 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: Dmitriy A. Dimov
Name (Printed or typed)

4953 Morandi Avenue
Address

North Port, FL 34286
City, State & Zip

941-423-7301
Dormitory Telephone number

messagecrosschurch@gmail.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: Church "The Message of the Cross", Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address
4953 Morandi Avenue
North Port, FL 34286

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Proclaiming Gospel

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

Appointed by initial officer

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Dmitriy Dimov, Pastor/Director
Address: 4953 Morandi Avenue
North Port, FL 34286

Name and Title: Inna Dimov, Trustee/Director
Address: 4953 Morandi Avenue
North Port, FL 34286

Name and Title: Vladimir Mironenko, Director
Address: 4147 Green Tree Ave
Sarasota, FL 34233

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

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: Dmitriy Dimov
Address: 4953 Morandi Avenue
North Port, FL 34286

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Dmitriy Dimov
Address: 4953 Morandi Avenue
North Port, FL 34286

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



Required Signature of Registered Agent

10/29/2010

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.



Required Signature of Incorporator

10/29/2010

Date

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TALLAHASSEE FLORIDA