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SECRETARY OF STATE
DIVISION OF CORPORATION
2011 MAY 16 PM 4:43

5/17/11

COVER LETTER

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

SUBJECT: IGLESIA EVANGELICA MINISTERIO DE SALVACION, 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
↑
Yes!

~~☒ \$78.75
Filing Fee &
Certificate of
Status
NO!~~

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate
ADDITIONAL COPY REQUIRED	

FROM: SANTOS EDGARDO VARELA SR.
Name (Printed or typed)

1502 MARKDALE ST. E.
Address

LEHIGH ACRES, FL, 33934
City, State & Zip

239-333-6054
Daytime Telephone number

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATION
2011 MAY 16 PM 4:43

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: IGLESIA EVANGELICA MINISTERIO DE SALVACION, INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address
500 SUNSHINE BLVD.
LEHIGH ACRES, FL.
33971

Mailing address, if different is:
1502 MARKDALE ST. E.
LEHIGH ACRES, FL.
33936

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: TO SERVE THE COMMUNITY BY TEACHING THE WORD OF THE HOLY BIBLE, PROVIDING A HOUSE OF THE LORD, JESUS CHRIST, SO THAT WE MAY WORSHIP IN HIS NAME AND OUTREACH TO OTHERS, GIVING CHARITY THROUGHOUT THE COMMUNITY

ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected and appointed: THROUGH THIS EVANGELICAL MINISTRY.
Elected to position

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS PRESIDENT, PASTOR

Name and Title: SANTOS E. VARELA SR.
Address: 1502 MARKDALE ST. E.
LEHIGH ACRES, FL.
33936

Name and Title: _____
Address: _____

Name and Title: LUIS AGUSTO VARELA
Address: VICE PRESIDENT, CO-PASTOR
7530 OMNI LANE APT. 101
FT. MYERS, FL. 33905

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: SANTOS E. VARELA SR.
Address: 1502 MARKDALE ST. E.
LEHIGH ACRES, FL.
33936

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: SANTOS E. VARELA SR.
Address: 1502 MARKDALE ST. E.
LEHIGH ACRES, FL.
33936

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

Santos E. Varela

Required Signature of Registered Agent

MAY 6, 2011

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.

Santos E. Varela

Required Signature of Incorporator

MAY 6, 2011

Date

F.B.I.
SECRETARY OF STATE
DIVISION OF CORPORATIONS
2011 MAY 16 PM 4:44