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11 SEP -9 AND: 5

ECRETARY OF SIA

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## **COVER LETTER**

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

SUBJECT:	His Glory to Nations, Inc.	
_	(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)	

Enclosed is an original and one (1) copy of the Articles of Incorporation and a check for:

\$78.75
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Certificate of
Status

\$78.75
Filing Fee &
Certified Copy
Status

\$87.50
Filing Fee,
& Certified Copy
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& Certificate

ADDITIONAL COPY REQUIRED

FROM: Stina Brockmann
Name (Printed or typed)

8352 Elan Drive
Address

Tallahassee, FL 32312
City, State & Zip

850. 519. 1050

Daytime Telephone number

ALFSB @ msn. 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)

The name of the corp	poration shall be: His Glory to	Nations,	Juc.	
ARTICLE II	PRINCIPAL OFFICE	•		
	Principal street address		Mailing address,	, if different is:
	8352 Elan Dr.	2	910 Kerry Fore	st Pkwy.
	Tallahassee, FL 32312	<	wite $D4-23$	12
			Tailahaisee, Fl	1 32309
ARTICLE III	PURPOSE			
The purpose for whi	ich the corporation is organized is:			
To teach.	and train the body of Ch	rist in the	e area of wor	ship
and to pr	each the gospel to the	nations,	•	·
ARTICLE IV	MANNER OF ELECTION The manner in v	which the directors a	are elected and appointed	:
Man A: re other	s will be appointed by the	Dresident	Fuel Lor election	· · · · · · · · · · · · · · · · · · ·
stated in +	he bylain,		Lat. 4 see CIC Clies	<b>ф</b>
ARTICLE V	<u>INITIAL OFFICERS AND/OR DIRECTU</u>			
	e: Stina Brockmann, President	Name and Title:_	Lorene Hau	<u> </u>
Address:	8352 Elan Dr. Tallahusee, FL 32312	_ Address: _	2905 Hornin	51 32301
	Janamire Lr 25715	- -	- (AUANA) SEE	72201
Name and Titl	e: Lee Lyons	Name and Title:	lan Zetterlu	ınd
Address:	4345 Cool Emerald Dr.	Address:	Kölvägen 10	
7 1441 000.	Tallahassee, FL 32303	_	945 33 Ros	
		_	SHEDEN	
Name and Titl	e: George Brockmann	Name and Title:		
Address:	8352 Elan Dr.	_ Address:		
riddi voo,	Tallahassee, FL 32312			
			<u></u>	
	REGISTERED AGENT		. 7	
	ida street address (P.O. Box NOT acceptable) of	the registered agent	t is:	
Name:	Stina Brockmann	-	<u> </u>	
Address:	8352 Elan Dr. Tallaha ssee , FL 32312	5	ב על	
	Tallahassee, FL 32312	=	υ U	S 49
		-	Ē	ng
ARTICLE VII	<u>INCORPORATOR</u>		: · · · · · · · · · · · · · · · · · · ·	
The name and addr	ress of the Incorporator is:		_	© © <b>□</b>
Name:	Stina Brochmann	_	· 🔀	≦
Address:	8352 Elan Dr.	- -	Ş	<u> </u>
	Tallahassee, FL 32318	<u>_</u>	, s	
	d an assistant around to account commiss of mucco	es for the above st	exted comparation at the	nlace decionated in this
eartificate Lauren	d as registered agent to accept service of proces litiar with and accept the Appointment as registers	ss jor ine avove si od agont and agroo	uieu corporuiion ui ine to act in this canacity	pace aesignatea in this
cernjicuie, i u <del>n juu</del>	unar win and accept the appointment as registers	eu ugeni unu ugree	to act in this cupacity	
$\searrow$	ku to	<del></del>	Q 0	1 - (1
	Required Signature of Registered Agent	<del></del>	Sep.	Date
		_		
I submit this docum	nent and affirm that the facts stated herein are tr	ue. I am aware tha	it any false information s	submitted in a document
to the Department of	State constitutes a third degree felony as provide	eu jor in 8.81/.133,	F10.	
	1, 'KK		Son	7 - 11
	Required Signature of Incorporator		<u></u>	1 - II
	required bigliature of incorporator			