

N120000003255

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

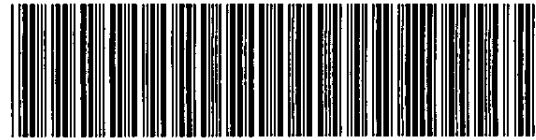
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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ON 03/22/2012 4:14 PM

COVER LETTER

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

SUBJECT: WORD OF RESTORATION LIFE & DELIVERANCE, CHURCH OF THE LIVING GOD, 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: JUDIE E. SPATES

Name (Printed or typed)

715 WEST JACKSON ST

Address

ORLANDO, FL 32805

City, State & Zip

(407) 209-5596

715 WEST JACKSON ST, ORLANDO, FL 32805
Phone number

ladyofjudah50@yahoo.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:

WORD OF RESTORATION LIFE & DELIVERANCE, CHURCH OF THE
LIVING GOD, INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address

715 WEST JACKSON STREET

ORLANDO, FL 32805

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To promote the Christian faith by spreading the Gospel of Jesus Christ; maintain worship and fellowship with others, regardless of race or national origin; distribute Christian literature; perform ordinances instituted by Christ; preach and teach scriptures from Holy Bible; give aid to poor and needy through regular community outreach services.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected and appointed:

All appointments shall be done by the General Assembly during the annual convening of the General Assembly

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: JUDIE E. SPATES, PASTOR

Address: 715 WEST JACKSON STREET

ORLANDO, FL 32805

Name and Title: _____

Address: _____

Name and Title: ARTESHUWA BROWN, TREASURER

Address: 735 BENTLEY STREET

ORLANDO, FL 32805

Name and Title: _____

Address: _____

Name and Title: LEANNA MIDDLETON, SECRETARY

Address: 2436 S. CONWAY RD. #104

ORLANDO, FL 32812

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: JUDIE E. SPATES

Address: 715 WEST JACKSON STREET

ORLANDO, FL 32805

ARTICLE VII INCORPORATOR

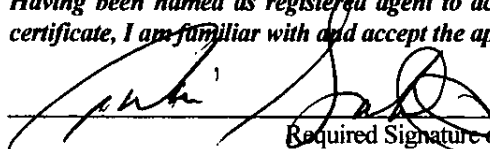
The name and address of the Incorporator is:

Name: JUDIE E. SPATES

Address: 715 WEST JACKSON STREET

ORLANDO, FL 32805

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

MARCH 20, 2012

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

MARCH 20, 2012

Date

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RECEIVED
STATE
DEPARTMENT OF STATE
CORPORATION DIVISION