

N12000005426

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

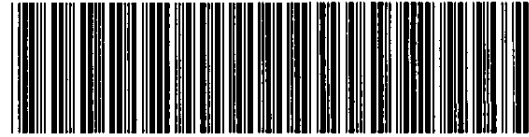
(Business Entity Name)

(Document Number)

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W/2-2745

FILED
12 MAY 29 PM 3:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. Burch MAY 30 2012

(Handwritten signature)

COVER LETTER

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

SUBJECT: Iglesia Consolación en Cristo, 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: Iglesia Consolación Cristo, Inc
Name (Printed or typed)

246 Canterbury Ct.
Address

Kissimmee, FL 34758
City, State & Zip

407 301 6432
246 Canterbury Ct. Telephone number

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

NOTE: Please provide the original and one copy of the articles.



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED
12 MAY 29 PM 4:50

REGISTRAR OF STATE
TALLAHASSEE, FLORIDA

May 18, 2012

ALMA I, PAGAN
246 CABREBURY CT
KISSIMMEE, FL 34758

SUBJECT: IGLESIA CONSOLACION EN CRISTO, INC.
Ref. Number: W12000027745

We have received your document for IGLESIA CONSOLACION EN CRISTO, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please type the name of the corporation in article I.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Tim Burch
Regulatory Specialist II
New Filing Section

Letter Number: 512A00014697

ARTICLES OF INCORPORATION
In compliance with Chapter 617, F.S., (Not for Profit)

ARTICLE I NAME

The name of the corporation shall be:

Iglesia Consolación en Cristo, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address
246 Canterbury Ct.
Kissimmee, FL 34758

Mailing address, if different is:
246 Canterbury Ct.
Kissimmee, FL 34758

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Open the church where the congregation can worship God with our heart and liberty, give counseling, teach the children a adults people. Help people with different needs.

Teach the people to live a better life, visit sick people, lonely people, If the need clothes or food, we will treat to look for their needs.

We want to do the mission of the Jesus's church, and that the Bible said.

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

The president was elected for the group of the church.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Pastor Alma I. Pagan, Director
Address: 246 Canterbury CT
Kissimmee, FL 34758

Name and Title: _____
Address: _____

Name and Title: Pastor Angel R. Pagan, Assisted of Ditecor
Address: 246 Canterbury CT
Kissimmee, FL 34758

Name and Title: _____
Address: _____

Name and Title: Mayra I. Pagan, Secretary
Address: 604 Bayport DR
Kissimmee, FL 34758

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: Alma I. Pagan
Address: 246 Cabterbury Ct
Kissimmee, FL 34758

FILED
12 MAY 29 PM 3:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Mayra I. Ortega
Address: 604 Bayport Dr.
Kissimmee, FL 34758

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

Alma I. Pagan
Required Signature of Registered Agent

5/14/12
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.

Mayra I. Ortega
Required Signature of Incorporator

5/14/12
Date