

N12000006059

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☒ WAIT

☐ MAIL

(Business Entity Name)

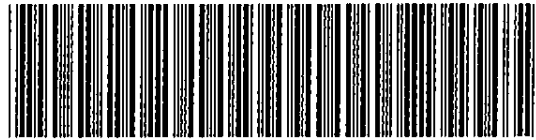
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12 JUN 19 PM 3:43

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12 JUN 19 PM 4:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

gr 6/19/12

COVER LETTER

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

SUBJECT: Church of God of Life and Deliverance *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: Pastor Dominique Emelan
Name (Printed or typed)

5686 Golf Club Pkwy
Address

Orlando FL 32808
City, State & Zip

407-558-1650
Daytime Telephone number

miranda.emelan@att.net
E-mail address: (to be used for future annual report notification)

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SECRETARY OF STATE

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 of God of Life and Deliverance Inc

ARTICLE II PRINCIPAL OFFICE

Principal street address
6812 Silver Star Rd
Orlando FL, 32818

Mailing address, if different is:
5686 Golf Club pkwy
Orlando FL, 32808

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: preaching the Gospel, social services

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

the Directors should be elected by law.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: <u>Pastor Dominique Emek</u>	Name and Title: _____
Address: <u>P 5686 Golf Club pkwy</u>	Address: _____
<u>Orlando FL, 32808</u>	_____

Name and Title: <u>VP Frantz Francis</u>	Name and Title: _____
Address: <u>2744 Pioneer Rd</u>	Address: _____
<u>Orlando FL, 32808</u>	_____

Name and Title: <u>SEC Miranda Vincent</u>	Name and Title: _____
Address: <u>5686 Golf Club pkwy</u>	Address: _____
<u>Orlando FL, 32808</u>	_____

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Marie Therese Pollard
Address: 407 Declaration Dr
Orlando FL, 32809

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Dominique Emek
Address: 2907 High Tower Ave. E.
Lehigh Acres Florida
33971

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

Marie Therese Pollard
Required Signature of Registered Agent

6/19/12
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.

Dominique Emek
Required Signature of Incorporator

6/19/12
Date

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TALLAHASSEE, FLORIDA