

N120000/0680

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

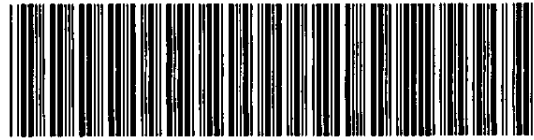
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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12 NOV -9 PM 12:49
TALLAHASSEE, FLORIDA

R 11/13/12

COVER LETTER

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

SUBJECT: GLORIOUS CHURCH INTERNATIONAL 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 JEAN MARIE DOMORAUD
Name (Printed or typed)

P.O. Box 93656
Address

LAKELAND FLORIDA 33804
City, State & Zip

863-934-1038
Daytime Telephone number

jeamied@gmail.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: GLORIOUS CHURCH INTERNATIONAL, INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address
1322 EAST MEMORIAL BLVD
LAKELAND, FLORIDA 33801

Mailing address, if different is:
P.O. BOX 93656
LAKELAND, FLORIDA 33804

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: TO DISSEMINATE THE GOSPEL OF JESUS CHRIST AND THE WORD OF GOD, TO THE END THAT THE PEOPLE OF GOD MAY BE CONFORMED TO THE IMAGE OF JESUS CHRIST.

ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected and appointed: THEY WERE APPOINTED BY THE PRESIDENT.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: <u>JEAN MARIE DOMORAUD PRESIDENT</u>	Name and Title: <u>MICHAEL MITCHELL TREASURER</u>
Address: <u>1933 GRAND BAY CIRCLE APT 203</u>	Address: <u>3087 SIRE TRAIL</u>
<u>LAKELAND, FLORIDA 33810</u>	<u>LAKELAND, FLORIDA 33811</u>

Name and Title: <u>JOANNE DOMORAUD VICE PRESIDENT</u>	Name and Title: _____
Address: <u>1933 GRAND BAY CIRCLE APT 203</u>	Address: _____
<u>LAKELAND, FLORIDA 33810</u>	_____

Name and Title: <u>CASSANDRA JOHNSON SECRETARY</u>	Name and Title: _____
Address: <u>1935 CRYSTAL GROVE DRIVE APT 28</u>	Address: _____
<u>LAKELAND, FLORIDA 33801</u>	_____

ARTICLE VI REGISTERED AGENT

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

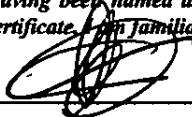
Name: JOANNE DOMORAUD
Address: 1933 GRAND BAY CIRCLE APT 203
LAKELAND, FLORIDA 33810

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: JEAN MARIE DOMORAUD
Address: 1933 GRAND BAY CIRCLE APT 203
LAKELAND, FLORIDA 33810

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

11-05-12
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.



Required Signature of Incorporator

11-05-12
Date

12 NOV -9 PM 10:43
TALLAHASSEE, FLORIDA