

1413000009516

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☒ WAIT

☐ MAIL

(Business Entity Name)

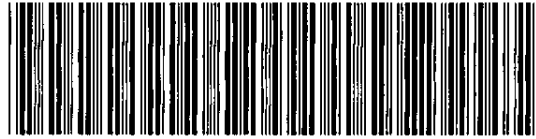
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RECEIVED  
13 OCT 22 PM 2:15  
DIVISION OF CORPORATIONS

13 OCT 22 PM 2:26  
STATE OF FLORIDA  
DIVISION OF CORPORATIONS

ATTACHED  
FILED

11/22/13

## COVER LETTER

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

SUBJECT: Comunidad Cristiana Cristo Fusión, 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: Juan M. Ocampo, Jr.  
Name (Printed or typed)

1600-A Akridge Drive  
Address

Tallahassee, FL 32308  
City, State & Zip

(850) 524-2494  
Daytime Telephone number

jmo@crstofusion.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)

APPROVED  
AND  
FILED

13 OCT 22 PM 2:26

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE I NAME**

The name of the corporation shall be:

**Comunidad Cristiana Cristo Fusión, Inc.**

**ARTICLE II PRINCIPAL OFFICE**

Principal street address:

**1600-A Akridge Drive, Tallahassee, FL 32308**

Mailing address, if different is:

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: This Corporation is organized for exclusively religious purposes common to pastoral

and worship church ministry as defined by the Scriptures, the Holy Bible. Our commission is summarized as what is commonly known as

"The Great Commission": And Jesus came and said to them, "All authority in heaven and on earth has been give to me. Go therefore and

make disciples of all nations, baptizing them in the name of the Father and of the Son and of the Holy Spirit, teaching them to observe all I have

commanded you. And behold, I am with you always, to the end of the age (Matthew 28:18-20, English Standard Version). Furthermore, this corporation

is organized for charitable religious and educational purposes including for such purposes of the making of distributions to organizations that qualify

as exempt organizations under section 501(c)(3) of the Internal Revenue Code or the corresponding code or any future federal tax code.

**ARTICLE IV MANNER OF ELECTION**

The manner in which the directors are elected and appointed:

**As stated in the Bylaws.**

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: **Juan M. Ocampo, Jr., President**

Name and Title: \_\_\_\_\_

Address **1600-A Akridge Drive**

Address: \_\_\_\_\_

**Tallahassee, FL 32308**

Name and Title: **Marcela Saldarriaga Betancur, Secretary**

Name and Title: \_\_\_\_\_

Address **2102 Tamerlane Drive**

Address: \_\_\_\_\_

**Tallahassee, FL 32303**

Name and Title: **Cecilia Galvan, Treasurer**

Name and Title: \_\_\_\_\_

Address **2000 N. Meridian Rd. #321**

Address: \_\_\_\_\_

**Tallahassee, FL 32303**

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address \_\_\_\_\_ Address: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address \_\_\_\_\_ Address: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

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

Name: Michael C. Gold, Esq.

Address: 1277 Cedar Center Drive  
Tallahassee, FL 32301

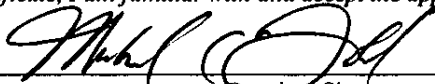
**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Juan Ocampo, Jr.

Address: 1600-A Akridge Drive  
Tallahassee, FL 32308

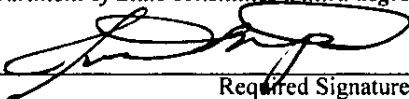
*Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity*



\_\_\_\_\_  
Required Signature of Registered Agent

10/14/2013  
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

10/14/2013  
Date