

**NA0000006331**

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.**

(((H14000159605 3)))



H140001596053ABC+

**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.**

To: Division of Corporations  
Fax Number : (850) 617-6381

From: Account Name : METRO BUSINESS AGENCY, INC.  
Account Number : I20080000101  
Phone : (239) 466-8600  
Fax Number : (239) 275-0865

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: CELIOLUCIA@YAHOO.COM

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

14 JUL -3 PM 1:45

FILED

**FLORIDA PROFIT/NON PROFIT CORPORATION  
REVIVAL INTERNATIONAL CENTER FORT MYERS CORP**

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$70.00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

14 JUL -3 AM 10:21

RECEIVED

10

Electronic Filing Menu

Corporate Filing Menu

Help

## COVER LETTER

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

SUBJECT: REVIVAL INTERNATIONAL CENTER FORT MYERS CORP  
(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: METRO BUSINESS AGENCY INC  
Name (Printed or typed)

15200 S TAMiami TRAIL 117  
Address

FORT MYERS, FL 33908  
City, State & Zip

239-466-8600

Daytime Telephone number

cellolucia@yahoo.com

E-mail address: (to be used for future annual report notification)

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

14 JUL -3 PM 1:45  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

**ARTICLES OF INCORPORATION**

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

**ARTICLE I NAME**The name of the corporation shall be: REVIVAL INTERNATIONAL CENTER FORT MYERS CORP**ARTICLE II PRINCIPAL OFFICE**Principal street address:3291 CLEVELAND AVE# AFORT MYERS, FL 33901

Mailing address, if different is:

3291 CLEVELAND AVE# AFORT MYERS, FL 33901**ARTICLE III PURPOSE**The purpose for which the corporation is organized is: CHURCH MINISTRY**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: CELIO LOPES - President Name and Title: SILA GOMEZ - SecretaryAddress: 102 SE 7TH ST Address: 9810 BERNWOOD PL DR# 208  
CAPE CORAL, FL 33990 FORT MYERS, FL 33966Name and Title: FRANCO MAXIMILIANO SOBRINHO - VP Name and Title: LILIAN MARIA POSADA - DirectorAddress: 2665 WINDAGE DR Address: 4341 LAZIO WAY# 1201  
MARIETTA, GA 30008 FORT MYERS, FL 33901Name and Title: LUCIA LOPES - Treasurer Name and Title: \_\_\_\_\_Address: 102 SE 7TH ST Address: \_\_\_\_\_  
CAPE CORAL, FL 33990 \_\_\_\_\_14 JUL - 3 PM 1:45  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

07/02/2014 16:25 Metro Business Agency

(FAX)239 275 0865

P.004/004

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: METRO BUSINESS AGENCY INC

Address: 15200 S TAMiami TRAIL 117  
FORT MYERS, FL 33908

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: HANNA SRODA

Address: 15200 S TAMiami TRAIL 117  
FORT MYERS, FL 33908

*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

07/02/2014

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

07/02/2014

Date

14 JUL -3 PM 1:45  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA