## 

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:



300261288323

08/15/14--01020--018 \*\*87.50

TILED

14 AUG 15 PM 2: 35

SHAPPINSSEE, FLERIS

Office Use Only

mD 8/20

## **COVER LETTER**

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

UBJECT: Iglesio	a Bautista La Cose (PROPOSED CORPORAT	cha Inc. Ename- <u>must includ</u>	E SUFFIX)
enclosed is an original a \$70.00 Filing Fee	**************************************	cles of Incorporation and a □\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate
. •	<b>v</b>	ADDITIONAL CO	PY REQUIRED
FROM:	Joel Pero Name (Pri	nted or typed)	

IBHP @ Concast . net
E-mail address: (to be used for future annual report notification)

772-342 - 1788

Daytime Telephone number

Vero Beach, FL City, State & Zip

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

	•	OF INCORPORATION Chapter 617, F.S., (Not for Profit)
ARTICL The name		A BOO TI
ARTICL	of the corporation shall be: <u>Iglesia</u> Boution	ISTA LA COSECHA LINCO
AKIICE		
	Principal <u>street</u> address:	Mailing address, if different is 210 NE 7th St. 210 NE 7th St.
-	210 NE 7th St.	210 NE 1- ST. == 01
-	OKeechobee, FL 34972	Okeechobee, FL 34972
	ose for which the corporation is organized is: +o a	advance the Kingdom of Jesus Christ.
		ough public worship of God, preaching and
	•	nian living by its members, personal evangelism,
mission	nary endeavors, and Christian ed	Aucation. This corporation is a non-profit
religio	ous corporation and is not organ	nized for the private gain of any person.
<del></del>		
ARTICL	E IV MANNER OF ELECTION The man	nner in which the directors are elected and appointed: Flected by
	•	+ 1. Appointed by the Church members.
	J , , , , , , , , , , , , , , , , , , ,	
<u>ARTICI</u>	E V INITIAL OFFICERS AND/OR DIRI	ECTORS
Name and	Tille: Flerida Algarin /Treasuren	Name and Title: Joel Perez / Director
Address	<b>y</b>	Address: 1529 Parct.
	OKeechobee, FL 34974	
Name and	Tide Liz Movie Dios Trustee	Name and Title:
Address	1529 Par ct	Address:
	VeroBeach, FL 3291do	
	T-17: A D4 /T	
Name and		Name and Title:
Address		Address:
	Port St. Lucie, FL	
	34983	<u> </u>

Name and Title:	Name and Title:
Address _	Address:
-	
Name and Title:	Name and Title:
Address	Address: 55 55
	Address:
_	
	변(*) 
ARTICLE VI	REGISTERED AGENT Storida street address (P.O. Box NOT acceptable) of the registered agent is:
Name:	Joel Perez
Address:	1529 Par ct.
Address.	Vero Beach, FL 32966
	100 000017 FL 02-100
ARTICLE VII The name and ac	INCORPORATOR  ddress of the Incorporator is:
Name:	Flerida Algarin
Address:	833 HWY 441 SE# 605
	Okechobee FL, 34974
Having been nai	med as registered agent to accept service of process for the above stated corporation at the place designated in this familiar with and accept the appointment as registered agent and agree to act in this capacity
	Required Signature of Registered Agent O8/12/2014  Date
I submit this doct	ument and affirm that the facts stated herein are true. I am aware that any false information submitted in a document nt of State constitutes a third degree felony as provided for in s.817.155, F.S.
- Fle	rida algares Required Signature of Incorporator  OS / 12 / 2014  Date
	<del>-</del>