(Requestor's Name)			
(Add	ress)		
(Add	ress)		
(City	/State/Zip/Phone #)		
PICK-UP	☐ WAIT ☐ MAIL		
(Business Entity Name)			
. (Doc	ument Number)		
Certified Copies	Certificates of Status		
Special Instructions to F	iling Officer:		

Office Use Only

Lilly & guo!



900263484839

08/25/14--01045--009 **78.75

COVER LETTER

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

SUBJECT:				
•	(PDOPOSED	CODDODATE NAME	MUST INCLUDE SE	EEIV)

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: EGLISE DE DIEU DE LA PROMESSE INC.

Name (Printed or typed)

6424 ARUNDEL DRIVE

Address

ORLANDO FL 32818

City, State & Zip

(321) 945 8621

Daytime Telephone number

DERSONO13@YAHOO.FR

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

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



FLORIDA DEPARTMENT OF STATE Division of Corporations

August 27, 2014

EGLISE DE DIEU DE LA PROMESSE 6424 ARUNDEL DRIVE ORLANDO, FL 32818

SUBJECT: EGLISE DE DIEU DE LA PROMESSE

Ref. Number: W14000052601

We have received your document for EGLISE DE DIEU DE LA PROMESSE and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name must contain a word that will clearly indicate that it is a corporation. This word may be: CORPORATION, CORP., INCORPORATED, or INC. Sections 617.0401(1)(a) and 617.1506(1), Florida Statutes, prohibits the use of the word COMPANY or CO. in the name of a non-profit corporation.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Sylvia Gilbert Regulatory Specialist II New Filing Section

Letter Number: 914A00018446

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

ARTICLE . The name of	NAME the corporation shall be: EGLISE DE	DIEU D	E LA PROMESSE INC. E.[)
ARTICLE			14 SEP 30 AM II: 49
<u>1</u> 64	Principal <u>street</u> address: 24 ARUNDEL DRIVE		Mailing address; if different is F STATE 5508 WEST VIEW DRIVESEE. FLORID.
0	RLANDO FL 32818		ORLANDO FL 32810
The purpose	for which the corporation is organized is:	or the pu	urpose of believers with the
			together as a church to seek the lost
souls fo	or Jesus-Christ and who ar	e also v	villing to be conformed with the laws
of the s	tate of Florida.		, , , , , , , , , , , , , , , , , , ,
100 14 p			
ARTICLE	TV MANNER OF ELECTION The ma	anner in whic	h the directors are elected and appointed: by election
and shall	be as provided in the by-laws.		
ARTICLE	V INITIAL OFFICERS AND/OR DI	PECTORS	
i ner i			
Name and Ti	Wilda Sibrun, officer	Name and	Derson Auguste, officer
Address	5202 Aventura Blvd.	Address:	5508 West View Drive
311	Orlando FL 32839		Orlando FL 32810
Name and Ti	tle: Jean De Liens St. Hilaire, officer	Name and	Title:
Address	1203 n. powers drive	Address:	815 Governor Ave
4. 4	Orlando FL 32818		Orlando FL 32808
73		•	
Name and Ti	tle: Esnel Alindor, Officer	Name and	Title:
Address	6432 Boylston Way	Address:	
1975 m. J.	Orlando FL 32818		
		•	

Name and Title: Address: Esnel Alindor Address: 6432 Boylston Way orlando FL 32818 ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Name: Derson Auguste Address: 5508 West View Drive Orlando FL 32810 Itaving been named as registered agent to accept service of process for the above stated corporation at the place designated in the certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity 08/19/2014 Required Signature of Registered Agent Date One Department of State constitutes a third degree felony as provided for in s.817.155, F.S.		1		
Name and Title: Name and Title: Name and Title:	Name and Title:_		Name and Title:	
ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: Name: Esnel Alindor Address: 6432 Boylston Way Orlando FL 32818 ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Name: Derson Auguste Address: 5508 West View Drive Orlando FL 32810 Historia been named as registered agent to accept service of process for the above stated corporation at the place designated in the certificate, I am familiar with and accept the applications are registered agent and agree to act in this capacity O8/19/2014 Required Signature of Registered Agent Date Submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document of the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. O8/19/2014	Address		Address:	
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