

N150000 5/24

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

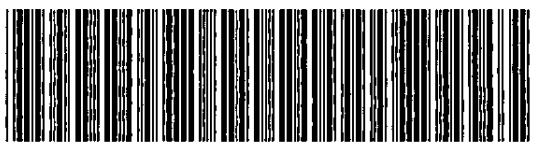
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EFFECTIVE DATE *May 17, 2015*



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FILED
15 MAY 20 AM 9:03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MAY 22 2015
S. GILBERT

COVER LETTER

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

SUBJECT: IGLESIA CRISTO DE NAZARET 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: LUIS A. RAMOS CASTRO

Name (Printed or typed)

6200 BARNES RD S. W-26

Address

JACKSONVILLE, FLORIDA 32216

City, State & Zip

(904)405-5860

Daytime Telephone number

iglesiacristodenazaretjax@yahoo.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: IGLESIA CRISTO DE NAZARET INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address:
6200 BARNES RD S. W-26

JACKSONVILLE, FLORIDA 32216

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Mailing address, if different is:
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: THE CORPORATION IS EXCLUSIVELY FOR RELIGIOUS,
CHARITABLE, EDUCATIONAL SCIENTIFIC AND LITERARY PURPOSES WITHIN THE MEETING OF SECTION
501 (C) (3) OF THE INTERNAL REVENUE CODE.

ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected and appointed: As Provided for the Baylors

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: President. Luis A. Ramos Castro Name and Title: _____

Address: 6200 Barnes Rd S. W-26 Address: _____
Jacksonville, Florida 32216

Name and Title: Secretary. Claribel Hernandez Rivera Name and Title: _____

Address: 6200 Barnes Rd S. W-26 Address: _____
Jacksonville, Florida 32216

Name and Title: Treasurer. Claribel Hernandez Rivera Name and Title: _____

Address: 6200 Barnes Rd S. W-26 Address: _____
Jacksonville, Florida 32216

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: Mr. Luis A. Ramos Castro
Address: 6200 Barnes Rd S. W-26
Jacksonville, Florida 32216

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Luis A. Ramos Castro
Address: 6200 Barnes Rd S. W-26
Jacksonville, Florida 32216

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: May 17, 2015 (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

Luis A. Ramos Castro
Required Signature of Registered Agent

05/17/2015
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.

Luis A. Ramos Castro
Required Signature of Incorporator

05/17/2015
Date