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(Re	equestor's Name)	_
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PICK-UP	☐ WAIT	MAIL
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(Bt	isiness Entity Nan	ne)
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Certified Copies	_ Certificates	of Status
Chapial Instructions to	Cilina Officari	
Special Instructions to	Filing Officer.	

Office Use Only



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SECRETARY OF STATE
FALLAHASSEE, FLORIDA

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COVER LETTER

(Okadinar)

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

Indian River	₽ Vinevard Inc			
SUBJECT:	r Vineyard Inc. (PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)			
Enclosed is an original a	and one (1) copy of the Art	icles 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 CO	PY REQUIRED	
FROM:	Richard H. Gillmor	ne (Printed or typed)	-	
	744 Kroegel Ave.			
	Sebastian, FL 32958	Address	_	
	772 918 8389	City, State & Zip	_	

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

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

Daytime Telephone number

rnjgillmor@gmail.com

ARTICLES OF INCORPORATION

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

<u>ARTICLE II</u>	PRINCIPAL OFFICE		
744	Principal <u>street</u> address: Kroegel Ave.	Mailing address, if different	t is:
	astian FL 32958 *		
needs of all p	for which the corporation is organized is al church. To equip new believers to ful	Ifill their respective functions as members of the body of the bod	Christ. To pray for the
<u>ARTICLE IV</u>	/ MANNER OF ELECTION The r	manner in which the directors are elected and appointed:	he Board of Directors
ARTICLE V	INITIAL OFFICERS AND/OR DIA tle: Richard H. Gillmor President 744 Kroegle Ave. Sebastian, Fl 32958	manner in which the directors are elected and appointed:	
ARTICLE IV ARTICLE V Name and Tit Address Name and Tit Address	INITIAL OFFICERS AND/OR DIF tle: Richard H. Gillmor President 744 Kroegle Ave. Sebastian, Fl 32958	manner in which the directors are elected and appointed:	15 JUL -9

Name and Title:	:	Name and Title:
Address _		Address:
-		
Name and Title:		Name and Title:
Address		Address:
-		-
_		
	REGISTERED AGENT	
The name and F	lorida street address (P.O. Box NOT accep	table) of the registered agent is:
Name:	Richard H. Gillmor	
Address:	744 Kroegel Ave.	
	Sebastian, FL 32958	
	INCORPORATOR ddress of the Incorporator is:	
Name:	Richard H. Gillmor	
Address:	744 Kroegel Ave.	
	Sebastian, FL 32958	
Effective date, if		15 . (OPTIONAL) d cannot be more than five business days prior or 90 business days
	inserted in this block does not meet the appetive date on the Department of State's record	olicable statutory filing requirements, this date will not be listed as the ds.
		of process for the above stated corporation at the place designated in this registered agent and agree to act in this capacity
All	all	07/06/2015
	Required Signature of Registered	Agent Date
	ument and affirm that the facts stated herei at of State constitutes a third degree felony a	n are true. I am aware that any false information submitted in a document is provided for in s.817.155, F.S.
All	Hall	07/06/2015
	Required Signature of Incomp	orator Date