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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

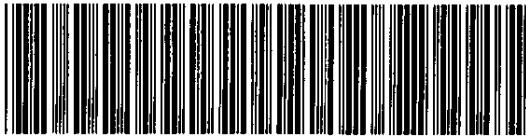
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AUG 04 2015
T. SCOTT



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 15, 2015

JOSE R. ALVAREZ-MARTINEZ
7141 HICKORY BRANCH CIRCLE
ORLANDO, FL 32818

SUBJECT: CENTRO CRISTIANO RESTAURACION EN CRISTO DE
ORLANDO, INC.
Ref. Number: W15000047487

RECEIVED
15 JUL 31 PM 2:49
TALLAHASSEE, FLORIDA

We have received your document for CENTRO CRISTIANO RESTAURACION EN CRISTO DE ORLANDO, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 617.0202(d), Florida Statutes, requires the manner in which directors are elected or appointed be contained in the articles of incorporation or a statement that the method of election of directors is as stated in the bylaws.

Please return 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.

Tyrone Scott
Regulatory Specialist II

Letter Number: 015A00014838

COVER LETTER

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

SUBJECT: Centro Cristiano Restauracion en Cristo de Orlando, 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: Jose R. Alvarez-Martinez

Name (Printed or typed)

7141 Hickory Branch Circle

Address

Orlando, FL 32818

City, State & Zip

(787)798-3158

Daytime Telephone number

restauracion@irecpr.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: Centro Cristiano Restauracion en Cristo de Orlando, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address:
948 South Semoran Boulevard

Orlando, Fl 32807

Mailing address, if different is:
7141 Hickory Branch Circle

Orlando, Fl 32818

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Promote, Coordinate, make programs and projects with
the purpose of preach the gospel.

ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected and appointed: Appointed by pastor

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Jose R. Alvarez-Martinez, Senior Pastor

Address: Preciosas Vistas del Lago
19-A Street 1
Toa Alta PR 00953

Name and Title: Ivy's Maldonado-Jorge

Address: El Pedregal
D Street E-9
Bayamon PR 00958

Name and Title: _____

Address: _____

Name and Title: Jose R. Alvarez-Nieves, Vice President

Address: El Pedregal
D Street E-9

Bayamon PR 00958

Name and Title: Maria M. Rivera-Figueroa, Secretary

Address: Jardines de Casa Blanca
23 California Street
Toa Alta PR 00953

Name and Title: _____

Address: _____

15 JUL 31 AM 10:20

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: Jose R. Alvarez-Martinez

Address: 7141 Hickory Branch Circle

Orlando, FL 32818

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: Jose R. Alvarez-Martinez

Address: 7141 Hickory Branch Circle

Orlando, FL 32818

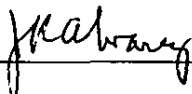
ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (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


Required Signature of Registered Agent

July 6, 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.


Required Signature of Incorporator

July 6, 2015
Date