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COVER LETTER

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

SUBJECT: KINGDOM LOVE CELEBRATIONS, 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: Sily Bustillo

Name (Printed or typed)

209 NE 23Rd Ave

Address

Pompano Beach, Fl. 33062

City, State & Zip

954 865 7272

Daytime Telephone number

klc.info@aol.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: KINGDOM LOVE CELEBRATIONS, INC

ARTICLE II PRINCIPAL OFFICE

Principal street address:
209 NE 23Rd. Ave.

Pompano Beach, Fl. 33062

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: The purpose of KINGDOM LOVE CELEBRATIONS, INC,
is a non-profit corporation and shall operate exclusively for educational and charitable purposes within the meaning of Section

501 (c)(3) of the Internal Revenue Code, or the corresponding section of any future Federal tax code. The mission of

Kingdom Love Celebrations, is to provide education by giving free lectures and slideshows titled "The Celebration of the Love and
Life", in schools, libraries, and other public venues as well as utilizing social media channels and the website. Our mission is to bring
men and woman to the realization of the value that resides in their being; an unmeasurable treasure. It is crucial that they live from
their own. This is the only way to move freely, towards being affirmed and strenthen to fully reality the purpose they were called for.

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

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Sily Bustillo -PRESIDENT

Name and Title: _____

Address 209 NE 23Rd. Ave.

Address: _____

Pompano Beach, Fl. 33062

Name and Title: Jaime Bustillo -SECRETARY

Name and Title: _____

Address 209 NE 23Rd. Ave.

Address: _____

Pompano Beach, Fl. 33062

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

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DEPT. OF STATE
CORPORATION DIVISION

ARTICLE VI REGISTERED AGENT

The **name and Florida street address** (P.O. Box NOT acceptable) of the registered agent is:

Name: Sily Bustillo
Address: 209 NE 23Rd. Ave.
Pompano Beach, Fl. 33062

ARTICLE VII INCORPORATOR

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

Name: Jose W. Osorio
Address: 9200 NW 38Th Dr. Ste 1
Coral Springs, Fl. 33065

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

08/28/2015

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

08/28/2015

Date