

N16000003489

(Requestor's Name)

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(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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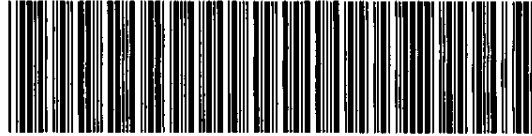
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N16000019454

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
16 MAR 23 PM 2:19



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

March 16, 2016

MARCOS JIMENEZ  
11585 SE 50TH AVE RD  
BELLEVIEW, FL 34420

SUBJECT: MISION PENTECOASTAL ALPHA & OMEGA BROOKSVILLE, INC.  
Ref. Number: W16000019454

We have received your document for MISION PENTECOASTAL ALPHA & OMEGA BROOKSVILLE, 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):

Icorporator must sign.,

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.

Tyrone Scott  
Regulatory Specialist II  
New Filings Section

Letter Number: 616A00005368

**COVER LETTER**

*pdf  
sent*

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

**SUBJECT:** MISSION PENTECOSTAL ALPHA & OMEGA BROOKSVILLE, 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:** MARCOS JIMENEZ  
Name (Printed or typed)

11585 SE 50TH AVE RD  
Address

BELLEVUE FL 34420  
City, State & Zip

352-347-5559  
Daytime Telephone number

bmisionayo@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: MISSION PENTECOSTAL ALPHA & OMEGA, INC.

### ARTICLE II PRINCIPAL OFFICE

Principal street address:  
19384 INGRAN ST

BROOKSVILLE, FL 34601

Mailing address, if different is:  
11585 SE 50TH AVE RD

BELLEVIEW FL 34420

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is: TO MAINTAIN RELIGIOUS WORSHIP AND TO SPREAD THE FAITH, TO HELP THE NEEDFUL IN THE COMMUNITY.

ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected and appointed: BY ELECTIONS

### ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: MARCOS JIMENEZ P O CEO

Address: 11585 SE 50TH AVE RD  
BELLEVIEW FL 34420

Name and Title: ROSA TORRES V S M A AMBR

Address: 11585 SE 50TH AVE RD  
BELLEVIEW FL 34420

Name and Title: LYDIA ORTIZ T C B

Address: 10428 IRELAND STREET  
SPRING HILL, FL 34608

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

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16 MAR 23 PM 2:13

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: MARCOS JIMENEZ  
Address: 11585 SE 50TH AVE RD  
BELLEVIEW FL 34420

**ARTICLE VII INCORPORATOR**

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

Name: ROSA TORRES  
Address: 11585 SE 50TH AVE RD  
BELLEVIEW FL 34420

**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: 1/1/2016 (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

1/6/2016

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

1/6/2016

Date

3/25/16