

N16000004055

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

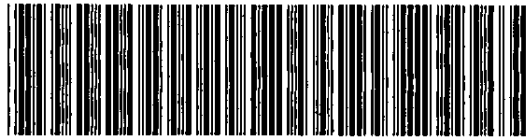
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2016 APR 11 PM 1:39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APR 20 2016

T. BROWN

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

SUBJECT: Restauracion de vida, 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: RESTAURACION DE VIDA, INC.

Name (Printed or typed)

2021 NORTH LOS ROBLES, AVENUE

Address

PASADENA, CA 91103

City, State & Zip

(626) 342-4240

Daytime Telephone number

julioynuria@yahoo.com

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

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 16, 2016

RESTAURACION DE VIDA, INC.
2021 NORTH LOS ROBLES AVE
PASADENA, CA 91103

SUBJECT: RESTAURACION DE VIDA, INC.
Ref. Number: W16000019701

We have received your document for RESTAURACION DE VIDA, INC. and your check(s) totaling \$87.50. 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.

The registered agent must sign accepting the designation.

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.

Teresa Brown
Regulatory Specialist II

Letter Number: 416A00005438

Articles of Incorporation

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

ARTICLE I NAME

RESTAURACION DE VIDA, INC.

The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE

Principal street address:
2021 NORTH LOS ROBLES AVENUE

PASADENA CA 91103

Mailing address, if different is:

ARTICLE III PURPOSE

TO OPERATE A CHRISTIAN CHURCH, TO TEACH ABOUT THE

The purpose for which the corporation is organized is:

CHRISTIAN RELIGION, AND TO TEACH THE WORD OF GOD, WHILE TEACHING THE CONGREGATION HOW TO

LIVE WITHIN THE STRICTURES OF THE CHRISTIAN FAITH.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected and appointed:

BY DIRECT VOTE

of the directors, after congregation nomination.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: JULIO C. RENDON, PRES. & PASTOR

Address: 1277 N. FAIROAKS AVE.

PASADENA, CA 91103

(626) 342-4240

Name and Title: EMELINA GARAGE, TREAS.

Address: 150 PAINTER ST.

PASADENA, CA 91103

(626) 708-8237

Name and Title: JULIETA PEREZ, DEACON

Address: 103 N. FIGUEROA AVENUE

LOS ANGELES, CA 90042

(323) 674-1963

Name and Title: NURIA RENDON, V. PRES. & PTOR.

Address: 1277 N. FAIROAKS AVE.

PASADENA, CA 91103

(626) 342-4240

Name and Title: D'JANSEN AVILA, SCTY.

Address: 66 W WASHINGTON BLVD. #A

PASADENA, CA 91103

(323) 774-0556

Name and Title: PEDRO ROSALES, DEACON

Address: 2336 E WASHINGTON BLVD.

PASADENA, CA 91104

(626) 639-7658

2016 APR 11 PM 1:39
PASADENA, CA 91103
FALLA HERRERA, J. L.

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: HELION CRUZ GONZALEZ
Address: 4200 62ND AVENUE N, STE. D
PINELLAS PARK, FL 33781

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: JULIO C. RENDON
Address: 1277 N. FAIROAKS AVE.
PASADENA, CA 91103

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

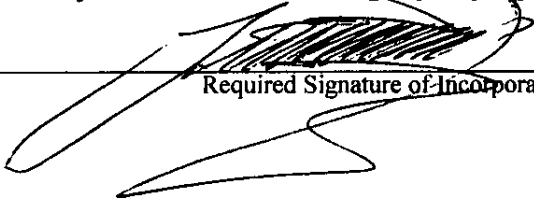


Required Signature of Registered Agent

02/15/2016

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

2/15/2016

Date