

N17000006192

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

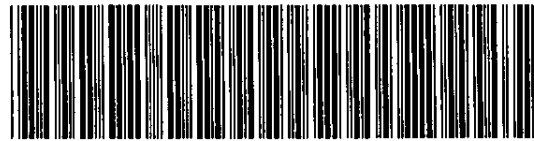
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200300121712

06/12/17--01023--013 **70.00

17 JUN 12 PM 2:11

D O'KEEFE
JUN 13 2017

COVER LETTER

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

SUBJECT: Church of God of Prophecy Spanish-Bonita Springs, 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: C. Thea Pitzen, Esq.

Name (Printed or typed)

150 Boush Street, Suite 900

Address

Norfolk, Va. 23510-1626

City, State & Zip

757-625-1400

Daytime Telephone number

slentz@goodmanallen.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: Church of God of Prophecy Spanish - Bonita Springs, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address:
27657 Shrive Ave., Bonita Springs, FL 34135

Mailing address, if different is:
P.O. Box 367866, Bonita Springs, FL 34136

ARTICLE III PURPOSE
The purpose for which the corporation is organized is: Christian Church

17 JUN 12 PM 2:11

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

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Teofilo Carion, President, Director
Address: 152 Oakwood Drive
Kissimmee, FL 34743

Name and Title: Angel Careb, Director
Address: 152 Oakwood Drive
Kissimmee, FL 34743

Name and Title: Ebli De La Rosa, Director
Address: 152 Oakwood Drive
Kissimmee, FL 34743

Name and Title: Maria Mejicanos, Director
Address: 11634 Dean Street
Bonita Springs, FL 34135

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

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: Ebli De La Rosa

Address: 152 Oakwood Drive

Kissimmee, FL 34743

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: C. Thea Pitzen, Esq.

Address: 150 Boush Street, STE 900

Norfolk, VA. 23510

FILED
17 JUN 12 PM 2:11
TALLAHASSEE, FL

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 days prior or 90 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

Ebli De La Rosa
Required Signature of Registered Agent

May 17, 2017
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.

C. Thea Pitzen
Required Signature of Incorporator

June 2, 2017
Date

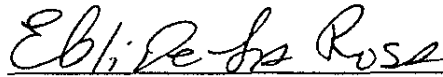
ACCEPTANCE BY REGISTERED AGENT

HAVING BEEN NAMED TO ACCEPT SERVICES OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN ARTICLE XIV OF THESE ARTICLES OF INCORPORATIONS, THE UNDERSIGNED AGREES TO ACT IN THIS CAPACITY, AND FURTHER AGREES TO COMPLY WITH THE PROVISIONS OF ALL STATUES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF ITS DUTIES.

DATED THIS 17 DAY OF MAY, 2017



Signature of Registered Agent



Print Name

FILED
17 JUN 12 PM 2:11
CLERK OF SUPERIOR COURT
STATE OF MICHIGAN