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(D.	equestor's Name)	
(17)	equestor's Name,	
(Ar	ddress)	
(A	ddress)	
(C	ity/State/Zip/Phone #))
PICK-UP	MAIT	MAIL
(B:	usiness Entity Name)	
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	ocument Number)	
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Certified Copies	Certificates of	Status
Special Instructions to	Filing Officer:	_

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EFFECTIVE DATE 18/20/17

208/28/17

COVER LETTER

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

MIAMI - FO SUBJECT:	RT LAUDERDALE INTERNA	ATIONAL CHRISTIAN CHU	RCH, INC.			
SUBJECT:	(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)					
m i i i i i i i i i i i i i i i i i i i	- J (1) Colo . And	ial w of Ingomoration and	a check for:			
Enclosed is an original a	and one (1) copy of the Art	icles of incorporation and	a check for .			
□ \$70.00	□ \$78.75	□ \$78.75	■ \$87.50			
Filing Fee	Filing Fee &	Filing Fee	Filing Fee,			
	Certificate of	& Certified Copy	Certified Copy			
	Status		& Certificate			
		ADDITIONAL COPY REQUIRED				
FROM:	MATTHEW SULLIVAN					
r KOWI.	Nar	_				
	500 BRICKELL AVENUE: APT 402					
			_			
		Address				

MIAMI, FL 33131

(626) 833-9480

MATT@USD21.ORG

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

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

City, State & Zip

Daytime Telephone number

ARTICLES OF INCORPORATION

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

The name of th	e corporation shall be:		ERNATIONAL CHRISTIAN CHURCH,		
ARTICLE II	PRINCIPAL OFFICE		<u>に</u> が、 ン:/	7 🔼	
	Principal street address:		Mailing address, if different is:	<u>₹</u> 5	
500 F	BRICKELL AVENUE: APT 402			20 -	
MIA	MI. FL 33131			- - 	
			<u></u>	i0:15	
				7	
ARTICLE III	PURPOSE				
	or which the corporation is organized is:	gious, charitable,	educational and scientific purposes withi	n the meani	ıg
of Section 501	(c)(3) of the Internatal Revenue Code of 198	6 or the correspo	nding provision of any future United Stat	es Internal	
Revenue Law,	including, for such purposes, the making of	distribution to or	ganizations that qualify as exempt organizations	zations.	
No part of the	activities of the corporation shall be carring of	on propaganda, o	r otherwise attempting to influence legisla	ation, or	
participating in	n, or intervening in (including the publication	n or distribution o	f statements), any political campaign on l	ocahalf of a	
	publix office. Notwithstanding any other prov				
candidate for p	bubus office, from unstanding any other prov	asion of mese M	ticics, this organization shall not carryon	any activitie	
		··	···		s n
permitted to b	e carried on by an organization exempt from		Annainte		es n
ARTICLE IV	MANNER OF ELECTION The manner	in which the dire	Annainte	de of 1986. d or Elected	
ARTICLE IV	MANNER OF ELECTION The manner INITIAL OFFICERS AND/OR DIRECTO	in which the dire	ctors are elected and appointed: Appointed		
ARTICLE IV	MANNER OF ELECTION The manner INITIAL OFFICERS AND/OR DIRECTO E. MATTHEW SULLIVAN-PRESIDENT	in which the dire	etors are elected and appointed: Appointed: HELEN SULLIVAN-VICE PRES		
ARTICLE IV ARTICLE V Name and Titl	MANNER OF ELECTION The manner INITIAL OFFICERS AND/OR DIRECTO MATTHEW SHILL IVAN-PRESIDENT	in which the dire	etors are elected and appointed: Appointed: HELEN SULLIVANAVICE PRES		es m
ARTICLE IV ARTICLE V Name and Titl	MANNER OF ELECTION The manner INITIAL OFFICERS AND/OR DIRECTO E. MATTHEW SULLIVAN-PRESIDENT	in which the dire	etors are elected and appointed: Appointed: HELEN SULLIVAN-VICE PRES		es n
ARTICLE V Name and Titl Address	MANNER OF ELECTION The manner INITIAL OFFICERS AND/OR DIRECTO E. MATTHEW SULLIVAN-PRESIDENT 500 BRICKELL AVENUE; APT 402 MIAMI, FL 33131 DEVON HAIRSTON-TREASURER	ors Name and Title Address:	HELEN SULLIVAN-VICE PRES 500 BRICKELL AVENUE: APT 402 MIAMI, FL 33131 MELANIA HARISTON-SECRETARY		es n
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permitted to be ARTICLE IV ARTICLE V Name and Titl Address Name and Titl Address	MANNER OF ELECTION The manner INITIAL OFFICERS AND/OR DIRECTO E: MATTHEW SULLIVAN-PRESIDENT 500 BRICKELL AVENUE; APT 402 MIAMI, FL 33131 EDEVON HAIRSTON-TREASURER E: 500 BRICKELL AVENUE; APT 402	ORS Name and Title Address: Name and Title	HELEN SULLIVAN-VICE PRES 500 BRICKELL AVENUE; APT 402 MIAMI, FL 33131 MELANIA HARISTON-SECRETARY		
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Name and Title:_		Name and Title:		
Address	· · · · · · · · · · · · · · · · · · ·	Address:		
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Name and Title:_		Name and Title:		
Address _		Address:		
_				
_				
				
	REGISTERED AGENT			
The name and Fl	orida street address (P.O. Box NOT accept			
Name:	MATTHEW SULLIV	AN		
Address:	500 BRICKELL AVENUE; APT	402	>	
	MIAMI, FL 33131		T Ans	
			<u> </u>	
	<u>INCORPORATOR</u>		20 Si = 20 E	
The <u>name and ac</u>	Idress of the Incorporator is:	' A N I		
Name:	MATTHEW SULLIV	AN	AH 10: 57	
Address:	500 BRICKELL AVENUE: APT	<u> 402</u>	57 IL IDA	
/ tourent	MIAMI, FL 33131			
Effective date, if	effective DATE: other than the date of filing: 08/20/20 date is listed, the date must be specific and	,(0.100100000000000000000000000000000000	or or 90 days after the filing.)	
Note: If the date document's effect	inserted in this block does not meet the appartment of State's record	plicable statutory filing requirements, rds.	this date will not be listed as the	
Having been na. certificate, I am	med as registered agent to accept service of amiliar with and accept the appointment as	s registered agent and agree to act in t	ration at the place designated in this capacity	this
M	Required Signature of Registered		08/20/2017	
	Required Signature of Registered	Agent	Date	
I submit this doc to the Departmen	ument and affirm that the facts stated here nt of State constitutes a third degree felony o	in are true. I am aware that any false as provided for in s.817.155, F.S.	information submitted in a docum	nent
71/	1 AAL 11 (11.		08/20/2017	
<u>\</u>	Required Signature of Incorp	porator	Date	