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LAZARUS CORPORATE FILING SERVICE

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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.
Account Number : I20000000019
Phone : (305)552-5973
Fax Number : (305)675-5944

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

FLORIDA PROFIT/NON PROFIT CORPORATION
IGLESIA RESTAURACION Y VIDA EN CRISTO INC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

SECRETARY OF STATE
TALLAHASSEE, FL

2018 OCT 29 PM 5:06

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Corporate Filing Menu

Help

ARTICLES OF INCORPORATION
In compliance with Chapter 617, F.S., (Not for Profit)**ARTICLE I NAME**

The name of the corporation shall be:

Iglesia Restauracion y Vida en Cristo Inc**ARTICLE II PRINCIPAL OFFICE**Principal street address:6950 W 6 Ave apt 503Hiataeah Fl 33014

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Counseling & teaching for couples,
young people & elders through the
study of the bible**ARTICLE IV MANNER OF ELECTION**

The manner in which the directors are elected and appointed:

By
The by laws**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title:

Leandro Fonseca (P)

Name and Title:

Anaydez Fonseca (VP)

Address

6950 W 6 Ave apt 503
Hiataeah Fl 33014

Address:

6950 W 6 Ave apt 503
Hiataeah Fl 33014

Name and Title:

Name and Title:

Address

Address:

Name and Title:

Name and Title:

Address

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: Leandro Fonseca
Address: 6950 W 6 AVE APT 503
Hialeah FL 33014

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Leandro Fonseca
Address: 6950 W 6 AVE APT 503
Hialeah FL 33014

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

[Signature]
Required Signature of Registered Agent

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.

[Signature]
Required Signature of Incorporator

Date