N19000011997

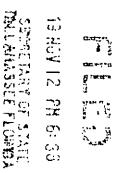
(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			

Office Use Only



800336616148

11/12/19--01029--025 **78.75



COVER LETTER

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

SUBJECT: La Nivera Iglésia Pentecerta I Inc. (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is an original a	nd one (1) copy of the Ar	ticles 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
		I ADDITIONAL CODUDED II	

FROM:

Rame (Printed or typed)

32024 1532 Que.

Address

Hemesteck, H. 33633

City, State & Zip

786-325-9620

Daytime Telephone number

Mevai restazenteus tal 2 & yapro com E-mail address: (to be used for future annual report hostication)

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

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

The name of the corporation shall be: La Nueva Is	lesia tentacostal, Inc.
ARTICLE II PRINCIPAL OFFICE	
236 SW 4+15+.	Mailing address, it different is: Clue.
Homesteal, Fl. 33030	Hornesteal, Fl. 33033
The purpose for which the corporation is organized is: to be by, Reaching, Evolving, Teaching other Community	a light to the Community and Sen Org people into
~··-	71 4.1-
be cleeted through a Committee	the directors are elected and appointed: They will voting process.
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS	
Name and Title: Res. Ray Sanchez Name at	
Address 30024 SW 153rd 4Ve. Address	
Homesteal, El. 33033	Homestead, Cl. 33033
Name and Title: V. Wes Oscar Sauchesame a	nd Title:
Address 1262 NW 105+ Howest adadress	×
FL 33030	
Name and Title: Sec Debby Suuchel Name as	nd Title:
Address 15420 SW 299 ST Address	
Home Stead Fla 33033	

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. Bo	x NOT acceptable) of the registered agent is:	
Name: Oscar S		
Address: 12 62 NW 10	· · · · · · · · · · · · · · · · · · ·	
Homestead	L 3303 RU	
ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Name: Address: ISL2D SW2 Homesteal,	996 St. = 1. 33037	
ARTICLE VIII EFFECTIVE DATE: Effective date, if other than the date of filing: _ (If an effective date is listed, the date must b	e 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 document's effective date on the Department of	t meet the applicable statutory filing requirements, this date will not be listed as the State's records.	
	cept service of process for the above stated corporation at the place designated in pointment as registered agent and agree to act in this capacity	this
Required Signature	of Registered Agent Date	
	s stated herein are true. I am aware that any false information submitted in a docur egree felony as provided for in s.817.155, F.S.	nent
1 di	ture of Incorporator Date	
Kequirea Signa	ure of incorporator Date	