



• COVER LETTER •

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

SUBJECT: EMMANUEL TABERJALUZ, 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: Jon Viler  
Name (Printed or typed)

401 W. MAIN ST SUITE 300  
Address

NORMAN, OK 73069  
City, State & Zip

405-310-4333  
Daytime Telephone number

SHAWMOR @ ABSAMAIL.CO.ZA  
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: EMMANUEL TABERNACLE, INC.

**ARTICLE II PRINCIPAL OFFICE**

Principal <u>street</u> address:	Mailing address, if different is:
<u>7901 4<sup>TH</sup> STREET NORTH, SUITE 300</u>	<u>SAME</u>
<u>ST. PETERSBURG, FL 33702</u>	

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: THIS CORPORATION IS A NON-PROFIT CORPORATION ORGANIZED AND OPERATED EXCLUSIVELY FOR RELIGIOUS, CHARITABLE, AND EDUCATIONAL PURPOSES WITHIN THE MEANING OF SECTION 501(C)(3), SPECIFICALLY MISSIONS AND EVANGELISM IN THE U.S. AND TO ALL UNREACHED PEOPLE

**ARTICLE IV MANNER OF ELECTION** The manner in which the directors are elected and appointed: AS STATED IN BYLAWS

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: <u>BREND D. JORDAN PRESIDENT</u>	Name and Title: <u>PAMELA L. JORDAN VICE-PRESIDENT</u>
Address: <u>Plot 5B RIVERPORT, POUWERMANE LIMPOPO, SOUTH AFRICA 0700</u>	Address: <u>Plot 5B RIVERPORT, POUWERMANE LIMPOPO, SOUTH AFRICA 0700</u>
Name and Title: <u>RODOLPH ZILLES SECRETARY</u>	Name and Title: _____
Address: <u>Plot 5B RIVERPORT, POUWERMANE LIMPOPO, SOUTH AFRICA 0700</u>	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: REGISTERED AGENTS INC.

Address: 79014th STREET NORTH SUITE 300  
ST. PETERSBURG, FL 33702

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: BARUNG D. JINDAN

Address: PLOT 5B RUMAH T, POLK WALK  
LIMPOU, SOUTH AFRICA 0700

**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*

\_\_\_\_\_  
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.*

\_\_\_\_\_  
Required Signature of Incorporator

1/21/2020  
Date

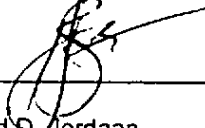
The entity acting as the registered agent on behalf of Emmanuel Tabernacle, Inc is as follows  
Registered Agents, Inc  
7901 4<sup>th</sup> St N  
Suite 300  
St. Petersburg, FL 33702

I hereby consent to Registered Agents Inc. being list as the registered agent for Emmanuel Tabernacle, Inc  
Bill Havre – Assistant Secretary

A handwritten signature in black ink that reads "Bill Havre". The signature is written in a cursive style with a large, stylized initial "B".

Article IX Dissolution

Upon the dissolution of this corporation, assets shall be distributed for one or more exempt purposes within the meaning of Section 501(c)(3) of the Internal Revenue Code, or corresponding section of any future federal tax code, or shall be distributed to the federal government, or to a state or local government, for a public purpose.

  
\_\_\_\_\_

Barend D. Jordaan

1/17/2020  
\_\_\_\_\_

Date