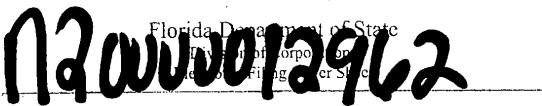
11/17/2020

Division of Corporations



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H20000397526 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : EXPRESS CORPORATE FILING SERVICE INC.

Account Number : 120000000146

Phone : (305)444-4994

Fax Number

: (305)444-4977

**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 ABUNDANT LIFE MINISTRIES USA INC

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

Electronic Filing Menu Corporate Filing Menu

Help

COV 1 8 2020

T. SCOT

ARTICLES OF INCORPORATION

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

ARTICLE I The name of the	NAME corporation shall be: ABUNDANT LIFE	MINISTRIES U	SA INC	B-1	
	PRINCIPAL OFFICE				
,	Principal street address:		Mailing address, if different is:		
8870	0 NW 36TH ST APT 3201				_
DO	RAL, FL 33178				_
ARTICLETII	PURPOSE		25.055 505 604 55745	. = 0=0\"0	_
The purpose fo	r which the corporation is organized is: T	HIS MINISTRY	WILL BE USED FOR CHARITAB	LE SERVIC	<u>=.</u>
w					
				·	
				- 	 -
					
ARTICLEIV	MANNER OF ELECTION The mann	er in which the dire	ctors are elected and appointed:	·	
BY MINUT	ES AND BY LAWS				
ARTICLE V	INITIAL OFFICERS AND/OR DIRECT	T/PS			
,					
Name and Title	JORGE FREILE LOZANO (P)	_ Name and Title:	MANASES FREILE CEPEDA (S	<u>)</u>	
Address	8870 NW 36TH ST APT 3201	_ Address:	8870 NW 36TH ST APT 3201	_	
	DORAL, FL 33178		DORAL, FL 33178	_	
		_		_	
Name and Title	MARGARITA CEPEDA ACUNA (V	PName and Title:		·	
Address		Address:		2020 KOV	
•	DORAL, FL 33178				77]
					
Name and Title	DANIEL FREILE CEPEDA (T)	 Name and Title 			
Address	8870 NW 36TH ST APT 3201	Address:		- FRI 12: 52	
Marcas	DORAL, FL 33178			高温 5	l O
		_	<u></u>		

Name and Title:_		
Address:		
Name and Titie:		
Address:		
		
	<u></u>	
acceptable) of the regist	ered agent is:	
14		
<u> </u>		
		
01		
2021	(OPTIONAL)	days after the filing)
he applicable statutory records.	filing requirements, this date	e will not be listed as the
vice of process for the ent as registered agent	above stated corporation at and agree to act in this capac	the place designated in this ity
ered Agen:		Date Date
herein are true. I am a	vare that any false inform a tio	on submitted in a document to
y as provided for in £8	117.155, F.S.	
	+	Date Date
ncorporator		Date
	Address: Name and Title: Address: Address:	Name and Title: Address: OPTIONAL) ic and cannot be more than five days prior or 90 ne applicable statutory filing requirements, this date records. vice of process for the above stated corporation and and us registered agent and agree to act in this capacity ered Agent ierein are true. I am aware that any false informaticy as provided for in 1817.155, F.S.