

N 22000013112

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

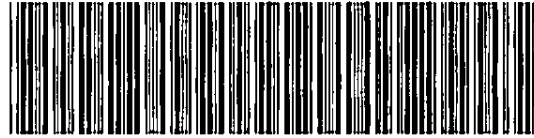
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: River Fire International 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: River Fire International Inc

Name (Printed or typed)

1656 Luft Lane

Address

Mascotte, FL 34753

City, State & Zip

863-412-2339

Daytime Telephone number

summermhughes@yahoo.com

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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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: River Fire International Inc

ARTICLE II PRINCIPAL OFFICE

Principal street address:

1656 Luft Lane

Mascotte, FL 34753

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To minister the gospel across the world and raise up revivalists.

ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected and appointed: as per bylaws

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Jeffrey Hughes, President

Name and Title: _____

Address 1656 Luft Lane

Address: _____

Mascotte, FL 34753

Name and Title: Summer Hughes, Vice-President

Name and Title: _____

Address 1656 Luft Lane

Address: _____

Mascotte, FL 34753

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

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SECRETARY OF STATE
TALLAHASSEE, FL 32399

FILED

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: Summer Hughes
 Address: 1656 Luft Lane
 Mascotte, FL 34753

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Summer Hughes
 Address: 1656 Luft Lane
 Mascotte, FL 34753

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

Summer Hughes
 Required Signature of Registered Agent

11/8/22
 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.

Summer Hughes
 Required Signature of Incorporator

11/8/22
 Date

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 TALLAHASSEE, FLORIDA