99000001652

TRANSMITTAL LETTER

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



SUBJECT: BETH TORAH CONGREGATION,	型nc
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(Proposed corporate name - must include suffix)

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\$70.00 Filing Fee

\$78.75

Filing Fee &

Certificate of

Status

\$78.75

Filing Fee

\$87.50

Filing Fee,

& Certified Copy Certified Copy

& Certificate

ADDITIONAL COPY REQUIRED



LIEBERMAN FROM: Name (Printed or typed)

NICHOLAS BLUD, # 1901

941-592-5313

Daytime Telephone number

Address

Stulie bernan GAVE

NAPLES, FL 34100 AUTHORIZATION BY PHONE TO

City, State & Zip

CORRECT Suffer

DOC. EXAM

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

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Not for Profit Corporation Act, hereby adopt(s) the following Articles of Incorporation:

ARTICLE I NAME

The name of the corporation shall be:

BETH TORAH CONGREGATION, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

NAPLES, FL BYID8

ARTICLE III PURPOSE(S)

The specific purpose(s) for which the corporation is organized is(are):

A RELIGIOUS SYNAGOGUE for the teaching of Judaism

ARTICLE IV MANNER OF ELECTION OF DIRECTORS

The manner in which the directors are elected or appointed is:

As Stated in the bylaws

ARTICLE V INITIAL REGISTERÉD AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

STU LIEBERMAN 6585 NICHOLAS BLVD, # 1901

NAPLES, FL 34108

ARTICLE VI INCORPORATOR

The <u>name and address</u> of the Incorporator to these Articles of Incorporation are:

STU LIEBERMAN

6585 NICHOLAS BLVD, # 1901

NAPLES , FL , 34108

Sty Suh

3-9-89

Signature/Incorporator

Date

(An additional article must be added if an effective date is requested.)

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Signature/Registered Agent

3-9-99

Date