## 199000000009

## TRANSMITTAL LETTER

Department of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Enclosed is an original and one(1) copy of the articles of incorporation and a check for: \$70.00 **1** \$78.75 \$78.75 \$87.50 Filing Fee Filing Fee & Filing Fee Filing Fee, Certificate of & Certified Copy Certified Copy Status & Certificate ADDITIONAL COPY REQUIRED FROM: MANUEL A. MEDOOZA

Name (Printed or typed) 305 - 885 - 0333 Daytime Telephone number

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: Jehouah witnesses Circuit S31R, Inc.
- Jehovah Witnesses Circuit Soin janc.
ARTICLE II PRINCIPAL OFFICE
The principal place of business and mailing address of this corporation shall be:
225 W 29 ST
Hislah, P2 33010
ARTICLE III PURPOSE(S)
The specific purpose(s) for which the corporation is organized is(are):
Spreading the word of Jesus Christ
ARTICLE IV MANNER OF ELECTION OF DIRECTORS
The manner in which the directors are elected or appointed is: /
As Stated in the by-laws.
ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS
The name and Florida street address of the initial registered agent are:
MANUEL A. MENDOZA
1220 FALCON AUC.
Misnis Springs, AL 33166
ARTICLE VI INCORPORATOR
The name and address of the Incorporator to these Articles of Incorporation are:
MANUEL A. MENDOZA
120 faten Ave Misay Springs 162 33166
Signature/Incorporator
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/Legistered Agent Date