

P05000159047

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

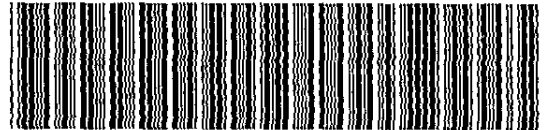
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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05 NOV-22 AM 10:36
TALLAHASSEE, FLORIDA

12/05/05
11/28/05
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11/28/05



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 28, 2005

LAVERN J KLEIN
6990 HELMS ROAD
PENSACOLA, FL 32526

SUBJECT: INTEGRAL LIFE SERVICES, INC.
Ref. Number: W05000052582

We have received your document for INTEGRAL LIFE SERVICES, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must state the number of shares of authorized stock.

An effective date may be added to the Articles of Incorporation if a 2006 date is needed, otherwise the date of receipt will be the file date. A separate article must be added to the Articles of Incorporation for the effective date.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6955.

Suzanne Hawkes
Document Specialist
NEW FILINGS

Letter Number: 805A00069259

COVER LETTER

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

SUBJECT: Integral Life Services, Inc.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are 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 of
Status

ADDITIONAL COPY REQUIRED

FROM: LaVern J. Klein

Name (Printed or typed)

6990 Helms Road

Address

Pensacola, FL 32526

City, State & Zip

(850) 944-4691

Daytime Telephone number

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

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

Integral Life Services, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

6990 Helms Road
Pensacola, FL 32526

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

The purpose of this corporation is to engage in and to transact any business for which corporations may be incorporated under the Florida General Corporation Act and to engage in any other trade or business which can, in the opinion of the board of directors of the corporation, be advantageously carried on in connection with or auxiliary to the foregoing business. Such business shall include, without limitation, charitable, religious and humanitarian aid and activities, including Christian education and training of Christian missionaries.

ARTICLE IV SHARES

The number of shares of stock is:

One (1)

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

LaVern J. Klein	James L. Gilbert	Donald E. Wilson
Chief Executive Officer	President, Asian Operations	President, North American Operations
6990 Helms Road	9891 Aileron Avenue	2618 Youngwood Lane
Pensacola, FL 32526	Pensacola, FL 32506	Cantonment, FL 32533

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:


LaVern J. Klein
6990 Helms Road
Pensacola, FL 32526

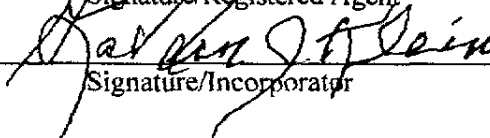
ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

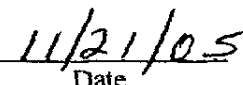
LaVern J. Klein
6990 Helms Road
Pensacola, FL 32526

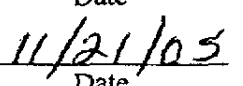
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent


Signature/Incorporator



Date


Date

FILED
05 NOV -22 PM 10:36
STATE
TALLAHASSEE, FLORIDA