10800002127

(Re	equestor's Name)	
(Ac	ldress)	
(Ad	ldress)	
(Cil	ty/State/Zip/Phone	· · · · · · · · · · · · · · · · · · ·
PICK-UP	MAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	ocument Number)	,
Certified Copies	_ Certificates	of Status
Special Instructions to Filing Officer:		
		ļ
		j
		·

Office Use Only



100119096771

03/05/08--01002--017 **70.00

DEPARTURAL OF STATE DIVISION OF CORPORATION TALLAHASSEE, FLORIDA

RECEIVED

D8 MAR - L PH 3: LL

COVER 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:

Filing Fee

□ \$78.75

Filing Fee & Certificate of

Status

□\$78.75

\$87.50

Filing Fee

Filing Fee,

& Certified Copy

Certified Copy

& Certificate

ADDITIONAL COPY REQUIRED

Daytime Telephone number

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: Tabernacle of Praise Tabo Inc.	
ARTICLE II PRINCIPAL OFFICE The principal place of business and mailing address of this corporation shall be:	08 MAR -L SECRETAL TALLAHAS
ARTICLE III PURPOSE The purpose for which the corporation is organized is: \[\(\text{D} \) \(\text{S} \) \(\text{D} \) \(\text{T} \) \(\text{D} \) \(\text{D} \) \(\text{T} \) \(\text{D} \) \	PH 3: 44 RY OF STATE SEE, FLORIDA
ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS List name(s), address(es) and specific title(s): D - E/OU/30 Jones D - Lissa Stevens	
ARTICLE VI. INITIAL REGISTERED AGENT AND STREET ADDRESS The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: E OUTS SOND HOUS SUITE ADDRESS ARTICLE VII INCORPORATOR The name and address of the Incorporator is: E OUTSE JONES 6315 Blountstown Hous, Suite D 6315 Blountstown Hous, Suite D	
**************************************	********* e place designated his capacity.
Signature/Registered Agent Date Signature/Incorporator Date	<u> </u>