



DATE:	DOCUMENT ID	DESCRIPTION	FILING	EXPED	PENALTY	CERT	COPY
04/29/2008	200812000666	DOMESTIC ARTICLES/CHURCH (ARC)	125.00	.00	.00	.00	.00

Receipt

This is not a bill. Please do not remit payment.

IGNACIO SANTIAGO
9655 WATERFORD PLACE #103
LOVELAND, OH 45140

STATE OF OHIO CERTIFICATE

Ohio Secretary of State, Jennifer Brunner**1776632**

It is hereby certified that the Secretary of State of Ohio has custody of the business records for

HISPANIC CHRISTIAN CHURCH HOUSE OF GOD, INC.

and, that said business records show the filing and recording of:

Document(s)

DOMESTIC ARTICLES/CHURCH

Document No(s):

200812000666

United States of America
State of Ohio
Office of the Secretary of State

Witness my hand and the seal of
the Secretary of State at Columbus,
Ohio this 1st day of May, A.D.
2008.

Ohio Secretary of State



Prescribed by:

Ohio Secretary of State
Central Ohio: (614) 466-3910
Toll Free: 1-877-SOS-FILE (1-877-767-3453)

www.sos.state.oh.us
e-mail: busserv@sos.state.oh.us

Expedite this Form: (Select One)

Mail Form to one of the Following:

- ☐ Yes PO Box 1390
Columbus, OH 43216
*** Requires an additional fee of \$100 ***
- ☒ No PO Box 670
Columbus, OH 43216

INITIAL ARTICLES OF INCORPORATION

(For Domestic Profit or Nonprofit)

Filing Fee \$125.00

RECEIVED

APR 25 2008

SECRETARY OF STATE

THE UNDERSIGNED HEREBY STATES THE FOLLOWING:

(CHECK ONLY ONE (1) BOX)

(1) <input type="checkbox"/> Articles of Incorporation Profit (113-ARF) ORC 1701	(2) <input checked="" type="checkbox"/> Articles of Incorporation Nonprofit (114-ARN) ORC 1702	(3) <input type="checkbox"/> Articles of Incorporation Professional (170-ARP) Profession _____ ORC 1785
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Complete the general information in this section for the box checked above.

FIRST: Name of Corporation Hispanic Christian Church House of God, INC.

SECOND: Location Loveland Hamilton
(City) (County)

Effective Date (Optional) 05/01/2008 Date specified can be no more than 90 days after date of filing. If a date is specified, the date must be a date on or after the date of filing.
(mm/dd/yyyy)

☐ Check here if additional provisions are attached

Complete the information in this section if box (2) or (3) is checked. Completing this section is optional if box (1) is checked.

THIRD: Purpose for which corporation is formed
Christian Church Ministry

Complete the information in this section if box (1) or (3) is checked.

FOURTH: The number of shares which the corporation is authorized to have outstanding (Please state if shares are common or preferred and their par value if any)

(Refer to instructions if needed)

(No. of Shares)	(Type)	(Par Value)

Completing the information in this section is optional**FIFTH:** The following are the names and addresses of the individuals who are to serve as initial Directors.

Ignacio Santiago
(Name)
9655 Waterford Place #103
(Street) NOTE: P.O. Box Addresses are NOT acceptable.
Loveland OH 45140
(City) (State) (Zip Code)

Mirian Gutierrez
(Name)
9655 Waterford Place #103
(Street) NOTE: P.O. Box Addresses are NOT acceptable.
Loveland OH 45140
(City) (State) (Zip Code)

(Name)

(Street) NOTE: P.O. Box Addresses are NOT acceptable.

(City) (State) (Zip Code)

REQUIRED

Must be authenticated
(signed) by an authorized
representative
(See Instructions)

Ignacio Santiago
Authorized Representative
IGNACIO SANTIAGO
(print name)

4-22-2008
Date

Mirian Gutierrez
Authorized Representative
MIRIAN GUTIERREZ
(print name)

4-22-2008
Date

Authorized Representative
(print name)

Date

