



COMMONWEALTH OF KENTUCKY
ALISON LUNDERGAN GRIMES, SECRETARY OF STATE

Division of Business Filings
Business Filings
 PO Box 718
 Frankfort, KY 40602
 (502) 564-3490
 www.sos.ky.gov

Articles of Incorporation
Non-profit Corporation

NAI

Please note: This form does not comply with 501 (C) status. You should contact the Internal Revenue Service prior to filing the Articles of Incorporation.

Pursuant to KRS 14A and KRS 273, the undersigned applies to qualify and for that purpose submits the following statements:

Article I: The name of the corporation is Church of Living Waters

Article II: The purpose for which the corporation is organized To establish a place of worship and also help the community

Article III: The name of the registered agent is Rev. Freddie Garcia

and the street address of the corporation's initial registered office in Kentucky is

<u>210 W. 5th St. Apt.201</u>	<u>Newport</u>	<u>KY</u>	<u>41071</u>
Street Address (No Post Office Box Numbers)	City	State	Zip Code

Article IV: The mailing address of the corporation's principal office is

<u>210 W. 5th St. Apt. 201</u>	<u>Newport</u>	<u>KY</u>	<u>41071</u>
Street or PO Box Number	City	State	Zip Code

Article V: The number of directors (minimum of three (3) required) constituting the initial board of directors is Freddie Garcia

The names and mailing addresses of the persons who are to serve as the initial board of directors are as follows:

<u>Freddie Garcia</u>	<u>210 W. 5th St. Apt. 201</u>	<u>Newport</u>	<u>KY</u>	<u>41071</u>
Name	Street or PO Box Number	City	State	Zip Code
<u>Sandra Garcia</u>	<u>210 W. 5th St. Apt. 201</u>	<u>Newport</u>	<u>KY</u>	<u>41071</u>
Name	Street or PO Box Number	City	State	Zip Code
<u>Tianna Garcia</u>	<u>210 W. 5th St. Apt. 201</u>	<u>Newport</u>	<u>KY</u>	<u>41071</u>
Name	Street or PO Box Number	City	State	Zip Code

Article VI: The name and mailing address of the incorporator is

<u>Freddie Garcia</u>	<u>210 W. 5th St. Apt. 201</u>	<u>Newport</u>	<u>KY</u>	<u>41071</u>
Name	Street Address or Post Office Box Number	City	State	Zip Code

_____ Name	_____ Street Address or Post Office Box Number	_____ City	_____ State	_____ Zip Code
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_____ Name	_____ Street Address or Post Office Box Number	_____ City	_____ State	_____ Zip Code
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Article VII: This application will be effective upon filing, unless a delayed effective date and/or time is provided. The effective date or the delayed effective date cannot be prior to the date the application is filed. The date and/or time is 11/10/14 3:30pm

(Delayed effective date and/or time)

I/We declare under penalty of perjury under the laws of the state of Kentucky that the foregoing is true and correct.

Freddie Garcia Incorporator 11/10/14

Signature of Incorporator

Print Name & Title

Date

I, Freddie Garcia

Print Name of Registered Agent

_____, consent to serve as the registered agent on behalf of the corporation.

Freddie Garcia Registered Agent

11/10/14

Signature of Registered Agent

Print Name & Title

Date