## SECRETARY OF THE STATE OF CONNECTICUT

MAILING ADDRESS: COMMERCIAL RECORDING DIVISION, CONNECTICUT SECRETARY OF THE STATE, P.O. BOX 150470, HARTFORD, CT 06115-0470 DELIVERY ADDRESS: COMMERCIAL RECORDING DIVISION, CONNECTICUT SECRETARY OF THE STATE, 30 TRINITY STREET, HARTFORD, CT 06106 PHONE: 860-509-6003

WEBSITE: <u>www.concord-sots.ct.gov</u>

## **CERTIFICATE OF FORMATION** NEW RELIGIOUS CORPORATION OR

## **RELIGIOUS SOCIETY**

USE INK. COMPLETE ALL SECTIONS. PRINT OR TYPE. ATTACH 81/2 X 11 SHEETS IF NECESSARY.

FILING PARTY (CONFIRMATION WILL BE SENT TO THIS ADDRESS):		FILING FEE: \$50		
		MAKE CHECKS PAYABLE TO "SECRETARY OF STATE"		
NAME:		OF STATE		
ADDRESS:				
ABBRECO.				
CITY:				
STATE:	ZIP:			
		TE FOR PUBLIC WORSHIP, HEREBY I 33-264A CONCERNING RELIGIOUS		
SOCIETIES AND RELIGIOUS CORP	PORATIONS.			
THE FORM OF ORGANIZATION IS (CHECK EITHER (A) OR (B)):				
A. A RELIGIOUS CORPORATION				
_				
B. A VOLUNTARY ASSOCI	ATION/RELIGIOUS SOCIETY			
		ASSOCIATION/RELIGIOUS SOCIETY) IS:		
THE NAME OF THE (RELIGIOUS C	ORFORATION) (VOLUNTART	ASSOCIATION/RELIGIOUS SOCIETT) IS.		
DATED AT:	THIS	DAY OF		
		ATEMENT, THAT THE STATEMENTS MADE IN		
THE FOREGOING CERTIFICATE AN	RE TRUE.			
TO BE SIGNED BY AT LEAST THREE PERSONS:				
1. NAME [PLEASE TYPE OR BLOCK PRINT]				
-				
	K FRIINT]			
RESIDENCE ADDRESS: (P.O.BOX				
<b>RESIDENCE ADDRESS:</b> (P.O.BOX ADDRESS:				
ADDRESS:				
ADDRESS:	UNACCEPTABLE)			
ADDRESS: CITY:	UNACCEPTABLE)			
ADDRESS: CITY:	UNACCEPTABLE)			
ADDRESS: CITY: STATE: ZIP:	UNACCEPTABLE)			

2. NAME [PLEAS	E TYPE OR BLOCK PRINT]	
RESIDENCE AI	DDRESS: (P.O.BOX UNACCEPTABLE)	
ADDRESS:		
CITY: STATE:	ZIP:	
SIGNATURE:		
3. NAME [PLEAS	E TYPE OR BLOCK PRINT]	
RESIDENCE AI ADDRESS:	DDRESS: (P.O.BOX UNACCEPTABLE)	
CITY:		
STATE:	ZIP:	
SIGNATURE:		