# 0200006952

#### TRANSMITTAL LETTER

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

SUBJECT: Minis terio de Capellanes en Acción, Inc.
(PROPOSED CORPORATE NAME-MUST INCLUDE SUFFIX)

Enclosed is 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

ADDITIONAL COPY REQUIRED

FROM: Rev. JORGE SANTIAGO
Name (Printed or typed)

6302 Dec Cir W.

LAKELAND, FL 33809

863-853-4404 Daytime Telephone number

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



# FLORIDA DEPARTMENT OF STATE Jim Smith Secretary of State

August 26, 2002

JORGE SANTIAGO 6302 DOE CIRCLE WEST LAKELAND, FL 33809

SUBJECT: MINISTERIO DE CAPELLANES EN ACCION, INC. (MCA)

Ref. Number: W02000024666

We have received your document for MINISTERIO DE CAPELLANES EN ACCION, INC. (MCA) and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Corporations may file using only the corporate name. Please delete any reference to the "doing business as name" in your document. If you wish to register your fictitious name, you may do so by filing the enclosed application and submitting the appropriate fees to this office.

The document must contain a registered agent with a Florida street address and a <u>signed</u> statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

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) 245-6904.

Freida Chesser Corporate Specialist New Filings Section

Letter Number: 902A00049764

#### ARTILCES OF INCORPORATION

#### <u>FOR</u>

#### MINISTERIO DE CAPELLANES EN ACCION, INC.

Chaplains in Action Ministry, Inc.)

The undersigned, acting as incorporators of a corporation pursuant to Chapter 617, Figrida Statutes, adopt the following Articles of Incorporation:

#### ARTICLE 1: NAME

The name of the corporation shall be:

### MINISTERIO DE CAPELLANES EN ACCION, INC. (Chaplains in Action Ministry, Inc.)

A ministry of "MINISTERIO DE CAPELLANES EN ACCION, INC. in Puerto Rico" (Chaplains in Action Ministry, Inc. in Puerto Rico)

#### ARTICLE II: PRINCIPAL PLACE OF BUSINESS AND MAILING ADDRESS

The principal place of business and the mailing address of this corporation shall be:

6302 Doe Circle W., Lakeland, Florida 33809 -- Place of Business P. O. Box 93616, Lakeland, Florida 33804 - Mailing Address

#### **ARTICLE III: PURPOSES**

Ministerio de Capellanes en Acción, Inc. (Chaplains in Action Ministry, Inc.) is a non-profit organization that is organized with the following specific purposes:

- To render volunteer services at institutions such as: hospitals, prisons, rehabilitation programs, treatment centers and other government and community agencies that may need our services.
- 2. To provide volunteer assistance to the Civil Defense in case of natural disasters.
- 3. To provide volunteer assistance in cases of emergencies, such as accidents.
- 4. To provide free seminars and orientation to marriage candidates and married couples.
- 5. To provide volunteer counseling to inmates as "Counselor Friends."
- 6. To provide volunteer chaplain services to weddings and funerals.
- 7. To provide seminars and workshops to the community at large such as: ministers and churches for common purposes and unity, community centers, recreational centers and organizations, etc.

#### ARTICLE IV: MANNER OF ELECTION OF DIRECTORS

The manner in which the directors are elected or appointed is as follows:

The directors or officers are appointed by the mother organization in Puerto Rico, as established by the constitution and by-laws.

#### ARTICLE V: LIMITATION OF CORPORATE POWERS

Corporate powers as provided by the Florida Statutes, Section 617.0302 and as provided by the Constitution and By-laws of the corporation, acting as a non-profit organization.

#### **ARTIVLE VI: INITIAL REGISTERED AGENT AND STREET ADDRESS**

The name and the street address of the initial registered agent is:

Name of Initial Registered Agent:

Street Address of Initial Registered Agent:

Rev. Claudio García 6302 Doe Circle W.

Lakeland, FL 33809

#### ARTICLE VII: INCORPORATORS

The names and street addresses of the incorporators for these Articles of Incorporation are:

Rev. Claudio García. President-Director

6302 Doe Circle W.

Lakeland, FL 33809

Rev. Elías Velez-Ortiz, VP-Director

Parcelas Tiburón

Calle 14 Buzón 2

Barceloneta, P.R. 00617

Rev. Jorge Santiago, D- S-T

6302 Doe Cir. W.

Lakeland, FL 33809

The Undersigned incorporators have executed these Articles of Incorporations this 7th day of July 1996.

Signatures of the Incorporators:

Rev. Claudio García, D- President Typed name of incorporator signing

Rev. Elías Vélez-Ortiz, D- Vice-P

Typed name of incorporator signing Rev. Jorge Santiago, D- Sec-Trea

Typed name of incorporator signing

Articles of Incorporation

## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 607.0501 or 617.0501, Florida Statutes, the undersigned corporation, organized under the laws of the state of Florida, submits the following statement in designating the registered office/registered agent, in the state of Florida.

1. The name of the Corporation is:		
MINISTERIO DE CAPELLANES EN ACCION, INC. (CROSSREFERENCE: CHAPLAINS IN ACTION MINISTRY, INC.)		
(CROSS REFERENCE: CHAPLAINS IN ACTION MINISTRY, INC.)		<del></del>
2. The name and address of the registered agent and office is:		
REV. Claudio GARCIA		
(Name)		
6302 DOE Circle W.		
(P.O. Box NOT acceptable)	02	
LAKELAND FL 33809 (City/State/Zip)	SEP	CAET
(City/State/Zip)	6-	
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Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Signature

Date