

N13000010329

(Requestor's Name)

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(City/State/Zip/Phone #)

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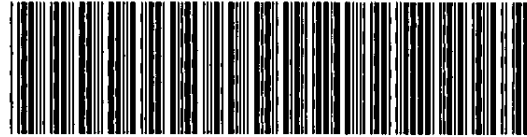
(Business Entity Name)

(Document Number)

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TALLAHASSEE FLORIDA

COVER LETTER

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

SUBJECT: Asociacion Civil Sapentia A.C., 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: Sofia Powell-Cosio, Esq.

Name (Printed or typed)

1900 SW 3rd Avenue

Address

Miami, FL 33129

City, State & Zip

305-579-9988

Daytime Telephone number

sofiapc@aol.com

E-mail address: (to be used for future annual report notification)

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: Asociacion Civil Sapentia A.C., Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address:
2103 Coral Way

Suite 306

Miami, FL 33145

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To facilitate the acquisition of learning materials especially those taught at the St. Rosa Seminary in Caracas, Venezuela and other related institutions.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected and appointed: Three members
elected by the General Assembly will serve for 5 years and can be re-elected.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Carlos Eduardo Marquez de Lina

Address: President

2103 Coral Way # 306

Miami, FL 33145

Name and Title: Fernando Jose Castro Amaya

Address: Secretary

2103 Coral Way # 306

Miami, FL 33145

Name and Title: Luis Armando Tineo Rivera

Address: Vice-President

2103 Coral Way # 306

Miami, FL 33145

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

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TALLAHASSEE FLORIDA

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

ARTICLE VI REGISTERED AGENT

The **name and Florida street address** (P.O. Box NOT acceptable) of the registered agent is:

Name: Fernando Rodriguez

Address: 2103 Coral Way, # 306

Miami, FL 33145

ARTICLE VII INCORPORATOR

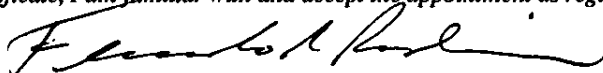
The **name and address** of the Incorporator is:

Name: Sofia Powell-Cosio, Esq.

Address: 1900 SW 3rd Avenue

Miami, FL 33129

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

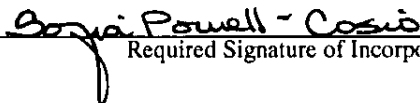


Required Signature of Registered Agent

11/12/2013

Date

I submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.



Required Signature of Incorporator

11/12/2013

Date

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