



**COVER LETTER**

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

**SUBJECT: From Outside In 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: Krizia Alina Capeles**

Name (Printed or typed)

**968 Millenbeck Ave**

Address

**Deltona, FL 32725**

City, State & Zip

**3864798344**

Daytime Telephone number

**krziacapeles@gmail.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: From Outside In Inc

**ARTICLE II PRINCIPAL OFFICE**

Principal street address:  
968 Millenbeck Ave Deltona, FL. 32714

Mailing address, if different is:

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: The mission is to create an atmosphere of love and acceptance for at-risk youth while inspiring confidence from the outside in. This corporation is formed exclusively for charitable, educational, religious, and/or scientific purposes within the meaning of Section 501c3 of the Internal Revenue Code, as amended, or under any corresponding provisions of any subsequent federal tax laws governing the distributions to organizations qualified as tax-exempt.

**ARTICLE IV MANNER OF ELECTION**

The manner in which the directors are elected and appointed: The members of From Outside In will decide and agree upon five initial directors, including themselves. All subsequent directors shall be elected through majority vote.

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Krizia Capeles  
Address: Chair  
968 Millenbeck Ave  
Deltona, FL. 32725

Name and Title: Beverly Sanchez  
Address: Vice Chair  
10073 Oak Crest Rd  
Orlando, FL 32829

Name and Title: James J. Capeles  
Address: Treasurer  
968 Millenbeck Ave  
Deltona, FL. 32725

Name and Title: Isa Adney  
Address: Development and Marketing Director  
1901 Edgebrook Circle Apt. 207  
Sanford, FL 32771

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_

Name and Title: Giovanna Dasso  
Address: Creative Design and Marketing  
120 Springwood Trail  
Altamonte Springs, FL 32714

FILED  
14 APR 28 PM 3:03  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address \_\_\_\_\_ Address: \_\_\_\_\_

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Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address \_\_\_\_\_ Address: \_\_\_\_\_

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**ARTICLE VI REGISTERED AGENT**

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

Name: Krizia Capeles

Address: 968 Millenbeck Ave

Deltona, FL. 32725

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SECRETARY OF STATE  
TALLAHASSEE FLORIDA

**ARTICLE VII INCORPORATOR**

The name and address of the incorporator is:

Name: Alina Capeles

Address: 968 Millenbeck Ave

Deltona, FL. 32725

*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*

*Krizia Capeles*

Required Signature of Registered Agent

4/22/14

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.*

*Alina Capeles*

Required Signature of Incorporator

4/22/14

Date