

N16000004175

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

(Business Entity Name)

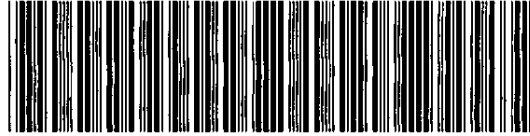
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16 APR 25 PM 3:14

J 4/26/16

**COVER LETTER**

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

**SUBJECT: TECH Youth Summer Camp, 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: Louis Philippe Rodriguez**  
Name (Printed or typed)

**835 NE 82nd St**  
Address

**Miami, FL 33138**  
City, State & Zip

**(347) 885-5898**  
Daytime Telephone number

**plrodriguez@gmail.com**  
E-mail address: (to be used for future annual report notification)

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16 APR 25 PM 3:14

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

FILED  
16 APR 25 PM 3:14  
RECEIVED  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

April 8, 2016

LOUIS PHILIPPE RODRIGUEZ  
835 NE 82ND STREET  
MIAMI, FL 33138

SUBJECT: TECH YOUTH SUMMER CAMP, INC.  
Ref. Number: W16000026341

We have received your document for TECH YOUTH SUMMER CAMP, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 607.0120(6)(b), or 617.0120(6)(b), Florida Statutes, requires that articles of incorporation be executed by an incorporator.

Please return the corrected 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) 245-6052.

Claretha Golden  
Regulatory Specialist II  
New Filing Section

Letter Number: 616A00007290

RECEIVED  
16 APR 25 AM 11:22  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

**ARTICLES OF INCORPORATION**  
In compliance with Chapter 617, F.S., (Not for Profit)

**ARTICLE I NAME**

The name of the corporation shall be: TECH Youth Summer Camp, Inc.

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**ARTICLE II PRINCIPAL OFFICE**

Principal street address:  
835 NE 82nd St

Mailing address, if different is:

Miami, FL 33138

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: Our purpose is to provide a summer camp experience specializing in therapeutic, technological and recreational enrichment for adolescents age 7 to 15 in every community.

The Corporation is organized exclusively for charitable, religious, educational and scientific purposes, including for such purposes, the making of distributions to organizations that qualify as an exempt organization under section 501(c)(3) of the Internal Revenue Code, or the corresponding section of any future federal tax code.

**ARTICLE IV MANNER OF ELECTION**

The manner in which the directors are elected and appointed:

As set forth in the bylaws.

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

Name and Title: Louis Philippe Rodriguez - President

Name and Title: Alexander Miles - Vice President/Treasurer

Address: 835 NE 82nd St

Address: 130 Pear Tree Ln.

Miami, FL 33138

Franklin Park, NJ 08823

Name and Title: Stanley Coleman - Secretary

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

Address: 909 Onondaga Ave.

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

Syracuse, NY 13207

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

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

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

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

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: Louis Philippe Rodriguez

Address: 835 NE 82nd St

Miami, FL 33138

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**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Louis Philippe Rodriguez

Address: 835 NE 82nd St

Miami, FL 33138

*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*

Louis Philippe Rodriguez

Required Signature of Registered Agent

3/31/2016  
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.*

Louis Philippe Rodriguez

Required Signature of Incorporator

4/19/2016  
Date