

N17000001326

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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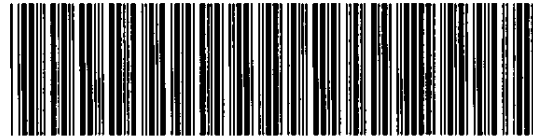
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

02/07/17

COVER LETTER

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

SUBJECT: MVV Group, 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: Ivon Linares

Name (Printed or typed)

9425 SW 171 CT

Address

Miami, FL 33196

City, State & Zip

(733) 562-4324

Daytime Telephone Number

mvvgroup.services@gmail.com

Email 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: NVV Group, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address:
12118 SW 114 Place
Miami, FL 33176

Mailing address, if different:
9425 SW 171 CT
Miami, FL 33196

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TALLAHASSEE, FLORIDA

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Our purpose is to reach abused and underserved women in South Florida thru different programs and education, creating opportunities that foster change.

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 521(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: Ivon Linares - President
Address: 9425 SW 171 CT
Miami, FL 33196

Name and Title: Nora Avila - Treasurer/Secretary
Address: 10920 SW 240 St
Homestead, FL 33032

Name and Title: Rosario Peralta - Director
Address: 9425 SW 171 CT
Miami, FL 33196

Name and Title: Francisco Fernandez - Vice President
Address: 9425 SW 171 CT
Miami, FL 33196

Name and Title: Maria Rosa - Director
Address: 9425 SW 171 CT
Miami, FL 33196

Name and Title: _____
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: Ivon Linares

Address: 9425 SW 171 CT

Miami, FL 33196

ARTICLE VII INCORPORATOR

The name and address of the incorporator is:

Name: Ivon Linares

Address: 9425 SW 171 CT

Miami, FL 33196

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TALLAHASSEE, FLORIDA

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

Registered Signature of Registered Agent

01/30/2017
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.

Incorporator Signature of Incorporator

01/30/2017
Date