

W19 000 007 151

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

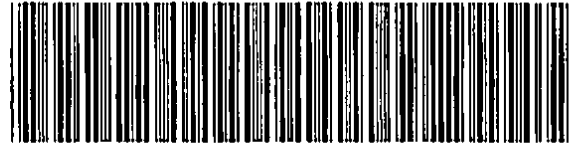
(Business Entity Name)

(Document Number)

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19 JUN 17 PM 3:02

D O'KEEFE

JUL 15 2019

W19-52538



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 31, 2019

CRISTINA L. SCALZO
21331 MORNING MIST WAY
LAND O LAKES, FL 34637

SUBJECT: CARITAS ABUNDANTIA MUNDI (CAM)
Ref. Number: W19000052538

2019 JUN 17 PM 12:07

We have received your document for CARITAS ABUNDANTIA MUNDI (CAM) and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Entities may file using only the entity's 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 an application and submitting the appropriate fees to this office.

Please return 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.

DANIEL L O'KEEFE
Regulatory Specialist II

Letter Number: 419A00010942

2019 JUN 17 PM 3:03

2019 JUN 17 PM 3:03

COVER LETTER

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

SUBJECT: 108 CAM 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: Cristina L. Scalzo
Name (Printed or typed)

21331 Morning Mist Way
Address

Lahd O' Lakes, FL 34637
City, State & Zip

(727) 277-3277
Daytime Telephone number

santacrististudent@yahoo.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: 108 CAM Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address:

21331 Morning Mist Way
Land O' Lakes, FL 34637

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Our mission is to enlighten the World and the human beings who live on it, by providing food, shelter and education through sharing our talents, integrity and financial values with those who are ready to receive.

ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected and appointed: Experience and education

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Cristina López Scalzo Name and Title: Carlos Alberto Rosado Ber

Address: 21331 Morning Mist Way Address: 7934 White Bluff Lane
Land O' Lakes, FL 34637 Memphis, TN 38119
CEO, LMHC, LPC COO, PhD, MS, MSEM

Name and Title: Maricar Michelle López Ramírez Name and Title: Lellanís López Ramírez

Address: 231 Calle Brisas del Mar Address: 231 Calle Brisas del Mar
Aguada, P.R. 00602 Aguada, P.R. 00602
CEO, B.S. Administrative Assistant

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

19 JUN 17 PM 3:11
FALL ASSOCIATION, INC.

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: Cristina Lopez Scalzo
Address: 21331 Morning Mist Way
Land O' Lakes, FL 34637

19 JUN 17 PM 3:03
TALLAHASSEE, FLORIDA

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Cristina L. Scalzo
Address: 21331 Morning Mist Way
Land O' Lakes, FL 34637

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

Cristina Lopez Scalzo
Required Signature of Registered Agent

06/12/2019
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.

Cristina L. Scalzo
Required Signature of Incorporator

06/12/2019
Date