

F16000004095

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

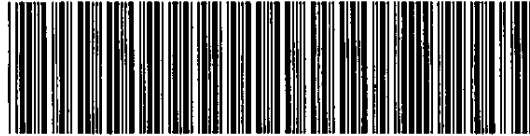
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

W16000057074

Office Use Only



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FILED
16 SEP 12 PM 3:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

9/11/16



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 17, 2016

ESPERANZA MONTOYA
12926 MARIBOU CIR
ORLANDO, FL 32828

SUBJECT: STREETS OF CHARITY, INC.
Ref. Number: W16000057074

2016 SEP 12 PM 4:21
TALLAHASSEE, FLORIDA

We have received your document for STREETS OF CHARITY, 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):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

The name and title of the person signing the document must be noted beneath or opposite the signature.

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) 245-6051.

Octavia I Simmons
Regulatory Specialist II
Registration Section

Letter Number: 416A00017395

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: STREETS OF CHARITY INC.
Name of Corporation – must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Not for Profit Corporation for Authorization to Conduct its Affairs in Florida", "Certificate of Existence", or "Certificate of Status" and check are submitted to register the above referenced not for profit corporation to conduct its affairs in Florida.

Please return all correspondence concerning this matter to the following:

ESPERANZA MONTOKA

Name of Person

STREETS OF CHARITY INC.

Firm/Company

12926 MARIBOU CIRCLE

Address

ORLANDO, FLORIDA 32828

City/State and Zip Code

streetsofcharity@yahoo.com

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

For further information concerning this matter, please call:

Esperanza Montoya

Name of Person

at (281)

Area Code

757 3452

Daytime Telephone Number

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Enclosed is a check for the following amount:

- ☐ \$70.00 Filing Fee ☒ \$78.75 Filing Fee & Certificate of Status ☐ \$78.75 Filing Fee & Certified Copy ☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy

**APPLICATION BY FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO
CONDUCT ITS AFFAIRS IN FLORIDA**

*IN COMPLIANCE WITH SECTION 617.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO
REGISTER A FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN
THE STATE OF FLORIDA:*

1. STREETS OF CHARITY, INC.

(Name of corporation: must include the word "INCORPORATED" or "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present. "Company" or "Co." may not be used as a corporate suffix by a nonprofit corporation.)

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Lousiana 3. 45-3794970
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. November 09, 2011 5. _____
(Date of Incorporation) (Date of duration, if other than perpetual)

6. _____
(Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S. to determine penalty liability.)

7. 13085 HWY 789 Keithville, la 71047
(Principal office address)

12926 Maribou Circle Orlando, florida 32828
(Current mailing address, if different)

8. Homeless low income community outreach
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box **NOT** acceptable)

Name: David Ordonez

Office Address: 12926 Maribou Circle
Orlando, Florida 32828
(City) (Zip Code)

10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.


(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

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16 SEP 12 PM 2:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

12. Names and addresses of officers and/or directors

A. DIRECTORS

Chairman: Esperanza Montoya
Address: 13085 Hwy 789 Keithville, la 71047

Vice Chairman: _____
Address: _____

Director: Charles Robin
Address: 11245 Ridge Haven Drive Keithville, la 71047

Director: Gildardo Montoya
Address: 13085 HWY 789 Keithville, la 71047

B. OFFICERS

President: Esperanza Montoya
Address: 12926 maribou circle Orlando, florida 32828

Vice President: David Ordonez
Address: 12926 Maribou Circle Orlando, florida 32828

Secretary: Gildardo Montoya
Address: 13085 HWY 789 Keithville, la 71047

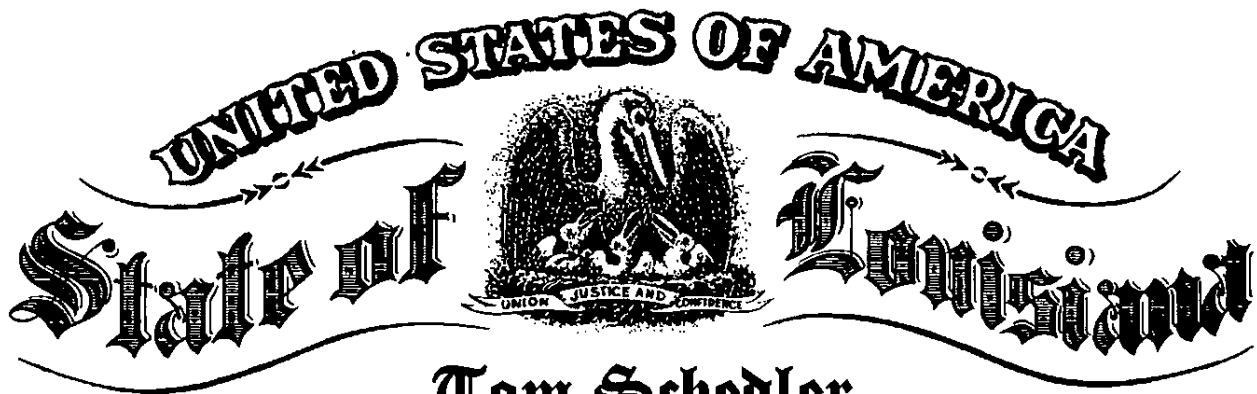
Treasurer: _____
Address: _____

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. Esperanza Montoya - President.
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Esperanza Montoya
(Typed or printed name and capacity of person signing application)

FILED
16 SEP 12 PM 1:07
CLERK OF STATE
TALLAHASSEE, FLORIDA



Tom Schedler
SECRETARY OF STATE

As Secretary of State of the State of Louisiana, I do hereby Certify that

STREETS OF CHARITY, INC.

A corporation domiciled in KEITHVILLE, LOUISIANA,

Filed charter and qualified to do business in this State on November 09, 2011,

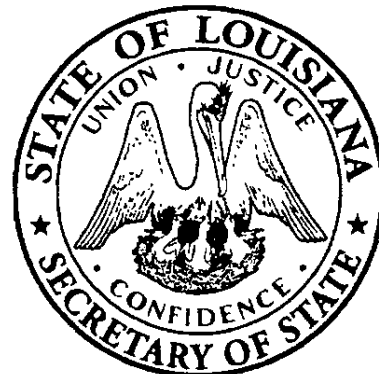
I further certify that the records of this Office indicate the corporation has paid all fees due the Secretary of State, and so far as the Office of the Secretary of State is concerned is in good standing and is authorized to do business in this State as a Non-Profit Corporation.

In testimony whereof, I have hereunto set my hand and caused the Seal of my Office to be affixed at the City of Baton Rouge on,

September 7, 2016

Secretary of State

Web 40661876N



Certificate ID: 10745462#NJH62

To validate this certificate, visit the following web site, go to **Business Services**, **Search for Louisiana Business Filings**, **Validate a Certificate**, then follow the instructions displayed.

www.sos.la.gov

Esperanza Montoya
President