

F15000005464

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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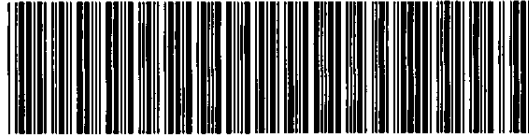
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE, FLORIDA

DEC 11 2015

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Latino Leadership Institute, 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:

Jaime Estades

Name of Person

Latino Leadership Institute, Inc.

Firm/Company

440 East 117th Street, Suite 5B

Address

New York, NY 10035

City/State and Zip Code

latinoleadershipinstitute@gmail.com

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

For further information concerning this matter, please call:

Jaime Estades

347

446-5786

Name of Person

at (_____) _____
Area Code

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:

Latino Leadership Institute Inc

1. _____
(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. New York 3. 990225000227
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 12-17-1998 5. N/A
(Date of Incorporation) (Date of duration, if other than perpetual)

6. None
(Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S., to determine penalty liability.)

7. 440 EAST, 117, STREET, SUITE 5 B, NY, NY 10035
(Principal office address)

Same as above
(Current mailing address, if different)

- For the promotional welfare as established under the federal code section 501 (c) (3) to foster interest in civic and
8. community affairs.
(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: Amy Mercado
Office Address: 5910 Bent Drive, #102
Orlando 32822
(City) , Florida (Zip Code)

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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.*

Amy Mercado
(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.

12. Names and addresses of officers and/or directors

A. DIRECTORS

Jaime Estades

Chairman:

440 East 117th Street, #5B, New York, NY 10035

Address:

Vice Chairman:

Address:

Ricardo Concepcion

Director:

2265 Third Avenue, 5th Floor, New York, NY 10035

Address:

Lillian Robles

Director:

2015 Marmion Avenue, New York, NY 10460

Address:

B. OFFICERS

Jaime Estades

President:

440 East 117th Street, #5B, New York, NY 10035

Address:

Vice President:

Address:

Ricardo Concepcion

Secretary:

2265 Third Avenue, 5th Floor, New York, NY 10035

Address:

Lillian Robles

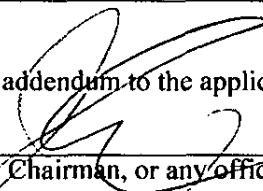
Treasurer:

2015 Marmion Avenue, New York, NY 10460

Address:

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TREASURY FLORIDA

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

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

14. Jaime Estades Board Chairperson/President
(Typed or printed name and capacity of person signing application)

State of New York
Department of State } ss:

I hereby certify, that the Certificate of Incorporation of THE LATINO LEADERSHIP INSTITUTE, INC. was filed on 02/25/1999, as a Not-for-Profit Corporation and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is an existing corporation.



*WITNESS my hand and the official seal
of the Department of State at the City of
Albany, this 28th day of October two
thousand and fifteen.*

Anthony Scardino

Executive Deputy Secretary of State