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Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : GENESIS TAX HOUSE OF FLORIDA, INC
Account Number : I20110000068
Phone : (800) 460-4829
Fax Number : (617) 507-0782

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

FOREIGN PROFIT/NONPROFIT CORPORATION
ASOCIACION CIVIL OBSERVATORIO DE INVESTIGACIONES SO

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S. PRATHER

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. ASOCIACION CIVIL OBSERVATORIO DE INVESTIGACIONES SOCIALES EN FRONTERA 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. VENEZUELA

(State or country under the law of which it is incorporated)

3.

(FEI number, if applicable)

4. 06/25/2018

(Date of incorporation)

5.

(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. AV LAS PILAS CASA 270, SAN CRISTOBAL, TACHIRA, 5001 - VENEZUELA

(Principal office address)

5156 NW 11th DRIVE, POMPANO BEACH, FL 33064

(Current mailing address, if different)

8. HUMANITARIAN HELP TO INCREASE LIFE QUALITY AT THE FRONTIER VENEZUELA-COLOMBIA

(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: LINA MAZUERA

Office Address: 5156 NW 11th DRIVE

POMPANO BEACH

(City)

, Florida 33064

(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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12. Names and addresses of officers and/or directors

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

RINA MAZUERA ARIAS

President: _____

AV LAS PILAS CASA 270, SAN CRISTOBAL, TACHIRA, 5001

Address: _____

VENEZUELA

CARLOS VICENTE RAMIREZ GARCIA

Vice President: _____

AV LAS PILAS CASA 270, SAN CRISTOBAL, TACHIRA, 5001

Address: _____

VENEZUELA

CARLOS EDUARDO RAMIREZ MAZUERA

Secretary: _____

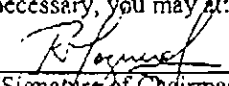
AV LAS PILAS CASA 270, SAN CRISTOBAL, TACHIRA, 5001 - VENEZUELA

Address: _____

Treasurer: _____

Address: _____

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)

RINA MAZUERA ARIAS

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

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N° COMPROBANTE: 201805W0000037855844

REGISTRO ÚNICO DE INFORMACIÓN FISCAL (RIF)

J411577650 ASOCIACIÓN CIVIL OBSERVATORIO DE INVESTIGACIONES SOCIALES EN FRONTERA **FECHA DE INSCRIPCIÓN:** 26/06/2018
FECHA DE ÚLTIMA ACTUALIZACIÓN: 26/06/2018
DOMICILIO FISCAL AV LAS PILAS CASA 270 URB SANTA INES SAN CRISTOBAL TACHIRA ZONA POSTAL 5001 **FECHA DE VENCIMIENTO:** 26/06/2021

GERENCIA REGIONAL DE TRIBUTOS INTERNOS
 REGIÓN LOS ANDES

3411577650-ERQ
 FIRMA AUTORIZADA



La condición de este contribuyente requiere la retención del 100% del impuesto causado, salvo que esté exento, no sujeto o demuestre ante el Agente de Retención del IVA que es un contribuyente exonerado.

La validez de este Comprobante debe verificarse a través de la dirección www.seniat.gob.ve, Sistemas en Línea mediante la opción 'Consulta Comprobante Digital RIF'. No requiere sello húmedo.

TRANSLATION

Registration number:
201805W0000037955844

SOLE REGISTER OF FISCAL INFORMATION (RIF)

J411577650 ASOCIACION CIVIL OBSERVATORIO DE INVESTIGACIONES SOCIALES EN FRONTERA

**PRINCIPAL ADDRESS: AV LAS PILAS CASA 270 URB SANTA INES SAN CRISTOBAL TACHIRA ZONA
POSTAL 5001**

REGISTRATION DATE: JUNE/25/2018

DATE OF LAST UPDATE: JUNE/26/2018

EXPIRATION DATE: JUNE/26/2021

**REGIONAL MANAGEMENT OF INTERNAL TAXES
LOS ANDES REGION**

**3411577650-ERQ
AUTHORIZED SIGNATURE**