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COVER LETTER

то:	Registration Section Division of Corporations	
SURI	JECT: The Albergue	
	Name of Corporation – must include suffix	
Dear S	Sir or Madam:	
Affair	nclosed "Application by Foreign Not-for:Profit Corporation for Authorization to Cons in Florida", "Certificate of Existence", or "Certificate of Status" and check are subject the above referenced not for profit corporation to conduct its affairs in Florida.	
Please	return all correspondence concerning this matter to the following:	
	Alexandra Jeronimo	
	Name of Person	
	The Albergue	
	Firm/Company	
	5206 24th Avenue Drive West	
		742
		100
	Address	7621 OCT 18
	Bradenton, FL 34209	
	City/State and Zip Code	
	elizalbergue@gmail.com	PM 4: 29
	E-mail address: (to be used for future annual report notification)	
For fu	orther information concerning this matter, please call:	
Elizat	peth Martin 917 748-1245 at ()	
- i	Name of Person Area Code Daytime Telephone Nu	mber
	Mailing Address:Street Address:Registration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of TallahasseeTallahassee, FL 323142415 N. Monroe Street, Suite Tallahassee, FL 32303	810
	sed is a check for the following amount:	
	Certificate of Status Certified Copy Cert) Filing Fee. ificate of Status & ified Copy

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

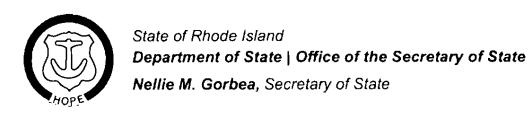
IN COMPLIANCE WITH SECTION 617.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN THE STATE OF FLORIDA:

ge as will clearly indicate that it is a coesent, "Company" or "Co." may not b	PORATED" or "CORPORATION" or words or abbroorporation instead of a natural person or partnership is e used as a corporate suffix by a nonprofit corporation rate name adopted for the purpose of transacting busing	f not so containe n.)	ed _
		ness in Florida)	-
ter under the law of which it is incorn			
try under the law of which it is incorn	3 85-3586914		
my finder the law of which it is meorp	orated) (FEI number, if applicable)		-
	e perpetuali		
ate of Incorporation)	(Date of duration, if other than pe	erpetual)	-
icted affairs in Florida if prior to registra	tion, Sec sections 617.1501 & 617.1502, F.S, to determ	tine penalty liabil	lity.)
nue Drive West, Bradenton, FL 34	209		
			-
(Current	mailing address if different)		_
Curcia	maning address. If directiny	~2	
		129	
educational activities in support of fan	nilies and communities		
orporation authorized in home state or	country to be carried out in the state of Florida)		. ,
eat addrage of Florida ragistared are	ent: (P.O. Box NOT recentable)	œ	
er address of Florida registered ago	ent. (1.0. Box <u>NOT</u> acceptable)	P:	
Karen Jeronimo			في
Karen Jeronano		~ ~	
5206 24th Avenue Drive West		9	
Bradenton	Florida 34209		
(City)	(Zip Code)		
agent's acceptance:			,
is application, I hereby accept the comply with the provisions of all:	appointment as registered agent and agree to a statutes relative to the proper and complete perf	ict in this capa	city.
	(Current educational activities in support of fan corporation authorized in home state of eet address of Florida registered against a gradenton (City) agent's acceptance: med as registered agent and to accept the comply with the provisions of all second (City)	(Current mailing address, if different) educational activities in support of families and communities corporation authorized in home state or country to be carried out in the state of Florida) eet address of Florida registered agent: (P.O. Box NOT acceptable) Karen Jeronimo 5206 24th Avenue Drive West Bradenton , Florida 34209 (City) (Zip Code) agent's acceptance: med as registered agent and to accept service of process for the above stated corp is application. I hereby accept the appointment as registered agent and agree to a	(Current mailing address, if different) educational activities in support of families and communities corporation authorized in home state or country to be carried out in the state of Florida) eet address of Florida registered agent: (P.O. Box NOT acceptable) Karen Jeronimo Educational Registered agent: (P.O. Box NOT acceptable) Karen Jeronimo Florida 34209 (City) (City) (Zip Code) agent's acceptance: med as registered agent and to accept service of process for the above stated corporation at the is application, I hereby accept the appointment as registered agent and agree to act in this capa comply with the provisions of all statutes relative to the proper and complete performance of management and complete performance of management and agree to act in this capa comply with the provisions of all statutes relative to the proper and complete performance of management and agree to act in this capa comply with the provisions of all statutes relative to the proper and complete performance of management and agree to act in this capa complete performance of management and agree to act in this capa complete performance of management and agree to act in this capa complete performance of management and agree to act in this capa complete performance of management and agree to act in this capa complete performance of management and agree to act in this capa complete performance of management and agree to act in this capa complete performance of management and to accept the appointment as registered agent and complete performance of management and to accept the appointment as registered agent and complete performance of management and to accept the appointment as registered agent and complete performance of management and to accept the appointment as registered agent and complete performance of management and accept the appointment as registered agent and complete performance of management and accept the appointment as registered agent and complete performance of management and accept the appointment as register

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. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

A. DIRECTOF □Chairman	Name: Alexandra Jeronimo	□:Chairman	Fausto Batista Name:	
□Vice Chai⊓nan	Address:	□Vice Chairman	Address: 5206 24th Avenue Drive West	
☐Director	Bradenton, FL 34209	□Director	Bradenton, FL 34209	
President		□President		
☐ Vice President		□Vice President		
☐Sccretary	■Treasurer	■Secretary	□Treasurer	
Other:	Other:	□Other:	[]Other:	
⊒Chairman	Name:	□Chai⊓nan	Name:	
∃Vice Chairman	Address: 1218 Calle Luchetti	□ Vice Chairman	Address:	
Director	San Juan, PR 00907	□Director		
President		President		
Vice President		□Vice President		
Secretary	☐ Treasurer	□ Secretary	☐ Treasurer	
Other:	☐ Other:	□Other:	□Other: □	
⊒Chairman	Name:	□Chai⊓nan	Name:	
⊒Vice Chairman	Address:	□Vice Chairman	Address: 2	
☐Director		Director	,	
President		□President		
□Vice President		□ Vice President		
☐ Secretary	☐ Treasurer	□ Secretary	□Treasurer	
Other:	Other:	□Other:	□Other:	
Non-indexed indi	Notice: Use an attachment to report more than victuals may be added to the index when filing y Signature of Chairman, Vice Chairman, or any cronimo, President (Typed or printed name and capacity of the content of th	our Florida Department o	of State Annual Report form. 12 of the application)	



CERTIFICATE OF GOOD STANDING

I, Nellie M. Gorbea, Secretary of State and custodian of the seal and corporate records of the State of Rhode Island, hereby certify that:

The Albergue

is a Rhode Island Non-Profit Corporation organized on October 14, 2020. I further certify that revocation proceedings are not pending; articles of dissolution have not been filed; all annual reports are of record and the corporation is active and in good standing with this office.

This certificate is not to be considered as a notice of the corporation's financial condition or business practices; such information is not available from this office.

. <u>.</u> :

Tullin U. Holen

SIGNED and SEALED on

August 12, 2021

Secretary of State

STATE OR RHOOK GO AND THE STATE OF THE STATE

Certificate Number: 21080048360

Verify this Certificate at: http://business.sos.ri.gov/CorpWeb/Certificates/Verify.aspx

Processed by: dantonelli