

F24 000004794

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

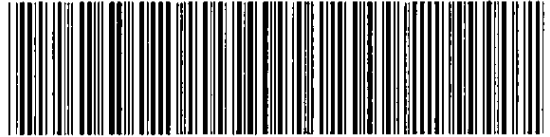
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800435858458

09/04/24--61004--002 **87.50

09/04/24 14:09:13

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Sovereign Military Order of the Temple of Jerusalem, 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:

Howard Giraldo

Name of Person

Commandery of The Holy Trinity for South Florida

Firm/Company

302 E 6 St.

Address

Hialeah, FL 33010

City/State and Zip Code

commandery@smotjholytrinity.org

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

For further information concerning this matter, please call:

Howard Giraldo

786

344-2452

Name of Person

at (_____) _____

Area Code

Daytime Telephone Number

Mailing Address:

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

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

☐ \$70.00 Filing Fee

☐ \$78.75 Filing Fee &
Certificate of Status

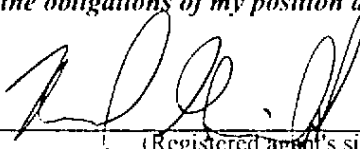
☐ \$78.75 Filing Fee &
Certified Copy

☒ \$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. Sovereign Military Order of the Temple of Jerusalem, 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.)
Commandery of The Holy Trinity for South Florida (SMOTJ Holy Trinity)
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
2. New Jersey 3. #22-6064601
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. January 13, 1972 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. 302 E. 6 St. Hialeah, FL 33010
(Principal office street address)

(Current mailing address, if different)
8. Continue our philanthropic work in the State of Florida, and open a checking account at Truist Bank (SMOTJ Holy Trinity)
(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: Howard Giraldo
Office Address: 302 E 6 St.
Hialeah, Florida 33010
(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.

2024 SEP -3 AM 9:43

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

A. DIRECTORS

☐ Chairman Name: Howard Giraldo
☐ Vice Chairman Address: 302 E 6 St.
☐ Director Hialeah, FL 33010
☐ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☒ Other: Commander ☐ Other: _____

☐ Chairman Name: Losmyr Luberisse
☐ Vice Chairman Address: 4327 Oak Terrace Drive
☐ Director Greenacres, FL 33463
☐ President _____
☐ Vice President _____
☒ Secretary ☐ Treasurer
☐ Other: _____ ☐ Other: _____

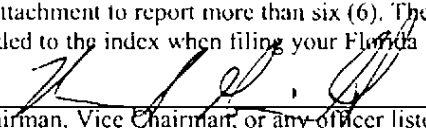
☐ Chairman Name: Gerson I. Cabrera
☐ Vice Chairman Address: 18470 Ruffian Way
☐ Director Boca Raton, FL 33496
☐ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☒ Other: Chancellor ☐ Other: _____

☐ Chairman Name: Bradley R. Miller
☐ Vice Chairman Address: 1831 Shower Tree Way
☐ Director Wellington, FL 33414
☐ President _____
☐ Vice President _____
☐ Secretary ☒ Treasurer
☐ Other: _____ ☐ Other: _____

☐ Chairman Name: Cesar E. Fernandez
☐ Vice Chairman Address: 197 NE 36 Ave Road
☐ Director Homestead, FL 33033
☐ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☒ Other: Inspector ☐ Other: _____

☐ Chairman Name: _____
☐ Vice Chairman Address: _____
☐ Director _____
☐ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other: _____ ☐ Other: _____

NOTE: Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

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

14. Howard Giraldo-Commander
(Typed or printed name and capacity of person signing application)

**STATE OF NEW JERSEY
DEPARTMENT OF THE TREASURY
DIVISION OF REVENUE AND ENTERPRISE SERVICES
SHORT FORM STANDING**

SOVEREIGN MILITARY ORDER OF THE TEMPLE OF JERUSALEM, INC.

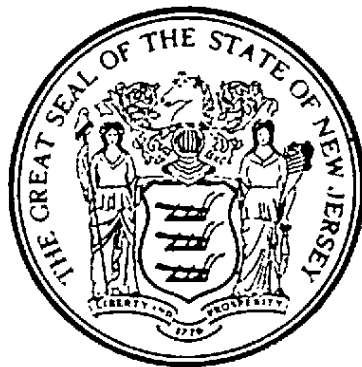
0900058928

I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic Non-Profit Corporation was registered by this office on June 29, 1962.

As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey. Annual Reports are outstanding for the following year(s): 2024

I further certify that the registered agent and office are:

C T CORPORATION SYSTEM
820 BEAR TAVERN ROAD
WEST TRENTON, NJ 08628



*IN TESTIMONY WHEREOF, I have
hereunto set my hand and affixed
my Official Seal at Trenton, this
29th day of August, 2024*

*Elizabeth Maher Muoio
State Treasurer*

Certificate Number : 6156629715

Verify this certificate online at

https://www1.state.nj.us/TYTR_StandingCert/JSP/Verify_Cert.jsp