(Requestor's Name) 3320 S.W. 87th AVENUE (Address) MIAMI, FLORIDA (305)552-5973 (City, State, Zip) LOCAL REPRESENTATIVE TALLAHASSEE OFFICE USE ONLY CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known): NDACIO. 3. (Corporation Name) (Document #) 4. (Corporation Name) (Document #) Pick up time Walk in Certified Copy Will wait Mail out Photocopy Certificate of Status NEW FILINGS **AMENDMENTS** Profit Amendment NonProfit Resignation of R.A., Officer/Director Limited Liability Change of Registered Agent Domestication Dissolution/Withdrawal Other Merger OTHER FILINGS REGISTRATION/ QUALIFICATION Annual Report Foreign Fictitious Name Limited Partnership Name Reservation Reinstatement Trademark Other

Examiner's Initials

ARTICLES OF INCORPORATION

FOR

FUNDACION ADONO HISTANDINE.

The undersigned, acting as incorporator(s) of a corporation pursuant to chapter 617, Florida Statutes, adopt(s) the following Articles of Incorporation:

ARTICLE I NAME:

The name of the corporation shall be:

FULLSACIONATIONO HISPANO INC.

ARTICLE II PRINCIPAL PLACE OF BUSINESS AND MAILING ADDRESS

4715 N.W 79 AU. MIANI FL. 33166

ARTICLE III PURPOSE(S)

The specific purpose(s) for which the corporation is organized is (are):

NON PROTIT ORGANIZATION TO
PROVIDE ILELP TO EXILE PEOPLE
FROM ALL COURTRIES. AND ALSO HELP
OTHER PEOPLE, ARTICLE IV MANNER OF ELECTIONS OF DIRECTORS:

The manner in which the directors are elected or appointed is as follows:

SHALL BE STATED IN THE BY-LAWS.

ARTICLE V LIMITATION OF CORPORATE POWERS

The corporate powers of this corporation are as provided the section 617.0302, Florida Statutes, unless limited as follows:

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

COSTAVO OSSA 6060 N. iv 1865+ \$J02 141AIH FC 33015 ARTICLE VII DIRECTORS (must have the minimum of three directors):

GUSTAUO OSSA C PRESIDENTE
NARIÀ I SALAZAR VICE PRESIDENTE
GUSTAUO H. OSSA SECRETARY.

(6060 N.W. 1865+ # 202
Miami, Fl 33015
ARTICLE VIII INCORPORATOR

The name and street address of the incorporator for these Article of Incorporator is:

COSTAVO DSSA (
6060 N.W 186 ST N- 702

141 A141 PC >3015

The undersigned incorporator has executed these Articles of

Incorporation this <u>08</u> day of <u>Feb</u>______, 20_0

signature

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 617.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation i	11 15.
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TOXIACIOX	ADO	VOHISPANO	Inc	
	' / / /	(must include suffix)		

2. The name and address of the registered agent and office is:

GUSTAVO OSSA CES	
(NAME)	i j
4715 NW 79 AU 58 3	
(P.O. Box or Mail Drop Box NOT ACCEPTABLE)	
MIAIN TL 33166 3	
(CITY/STATE/ZIP)	

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

(SIGNATURE)