TRANSMITTAL LETTER

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

Department of State **Division of Corporations** P. O. Box 6327 Tallahassee, FL 32314

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

\$70.00 Filing Fee

\$78.75

Filing Fee &

Certificate of

Status

□\$78.75

№ \$87.50

Filing Fee & Certified Copy

Filing Fee.

Certified Copy & Certificate

ADDITIONAL COPY REQUIRED

Name (Printed or typed)

1911 Sw 2nd ST apt #5

Address

Miami, Fl. 33135.

City, State & Zip

Daytime Telephone number

NOTE: Please provide the original and one copy of the articles.

ARTICLE I NAME The name of the corporation shall be: Fundation Artistica	D Culturab, Inc.
ARTICLE II PRINCIPAL OFFICE The principal place of business and mailing address of this	corporation shall be:
1911 SW 2nd Stree mami, Cl. 33135. ARTICLE III PURPOSE	7, apt #5
The purpose for which the corporation is organized is: The fundation will	show bow to set,
ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected or appointed:	
As Stated in Yul	appointed every year. Laws.
ARTICLE V INITIAL DIRECTORS/OFFICERS	
The name and addresses:	
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	ARY ASSE
· · · · · · · · · · · · · · · · · · ·	For A F
	E.S. D
ARTICLE VI INITIAL REGISTERED AGENT AL	VD STREET ADDRESS
The name and Florida street address of the registered age	
Ana D. LEDEW	Phone: (305) 644-5864
1911 SW 2nd ST # 5	
miame, Al. 33135	
ARTICLE VII INCORPORATOR	
The <u>name and address</u> of the Incorporator is:	01,210.(205) 10111 50117
Ana D. Ledeal. 1911 SW 2nd ST#5	Phone: (305) 644-5264
meami, Fl. 33/35	
Having been named as registered agent to accept service of proces.	**************
designated in this certificate, I am familiar with and accept the app	ointment as registered agent and agree to act in this
capacity.	<u> </u>
Carpoli Mahry	3/1/1/
Signature/Registered Agent	$\underline{\underline{\partial}}$
Togotto 13gon	Date
Cult Show	
Signature/Incorporator	Date

ARTICLES OF INCORPORATION

in Compliance, with Chapter 617, F.S., (Not for Profit)