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CORPORATION NAME(S) & DO	CUMENT NUMBI	ER(S) (if known):	_ ,	
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Annual Report	Foreign			
Fictitious Name	Limited Partnership	,	•	
Name Reservation	Reinstatement			
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ARTICLES OF INCORPORATION

FOR

ALBERTO M. DELGADO Ministries Inc. 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:

AlBerto M. Delgado Ministries Inc

ARTICLE II PRINCIPAL PLACE OF BUSINESS AND MAILING ADDRESS

The principal and mailing address of this corporation is:

P.O. BOY 557251 Miami F/ 33255

ARTICLE III PURPOSE(S)

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

Religious Services.
Public, charities and Educational Services

ARTICLE IV MANNER OF ELECTIONS OF DIRECTORS:

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

By 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

Alberto M. Delgrado 12295 See 93 Aren Miemi Fl 33176 =

ARTICLE VII DIRECTORS (must have the minimum of three directors): NAME AND ADDRESS

Alberto M. Delgrado President. 12295 S.W 93 Hren Miami El 33176

Mariam Delgado Vice Gresident 12295 s.w 92 Aren. Miami El 33176. Esther Jiranjee treasurer

5400 S. W 77 CT Apt. 3K.

ARTICLE VIII INCORPORATOR

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

Alberto M. Delgado 12295 S.W 931 Aren Miami Fl 23176.

The undersigned incorporator has executed these Articles of Incorporation this \(\frac{15}{25} \) day of \(\frac{1000mbcr}{2002}, 2002 \)

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.

A/BERTO M. DELGADO Minis (must include suffix)	tries Inc.
The name and address of the registered agent and office is:	
Alberto M. Delquedo	
(name) / 12295 S W 93 A - es : (P.O. Box or Mail Drop Box NOT Acceptable)	P 02 DEC - SECIAL Í
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(City/State/Zip)	何引 必

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 appointed 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 of Registered Agent

The name of the corporation is:

/2/3/82 Date