

Florida Department of State

Division of Corporations
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To:

Division of Corporations

Fax Number : (85

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From:

Account Name : FAS-T CORP. AGENTS, INC.

Account Number: 071001002335 Phone: (305)599-0839

: (305)599-0839 : (305)716-0346 2002 DEC -9 AH 9: 23

FLORIDA NON-PROFIT CORPORATION

HISPANIOLA PROGRAM OF EDUCATION AND PREVENTION OF HI

Certificate of Status	0
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ARTICLES OF INCORPORATION

2002 DEC -9 AM 9: 23

The undersigned incorporator, for the purpose of forming a corporation under the Florida ALLAND UP STATE Not for Profit Corporation Act, hereby adopt(s) the following Articles of Incorporation

ARTICLE I NAME

The name of the corporation shall be:

HISPANIOLA PROGRAM OF EDUCATION AND PREVENTION OF HIV-AIDS, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be: 7303 West Flagler Street

Miami, FL 33144

ARTICLE DI PURPOSE(S)

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

To help HIV and AIDS patients cope with their illness as well as to help people with high risk behavior and increase awareness.

ARTICLE IV MANNER OF ELECTION OF DIRECTORS

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

The manner of the election of directors will be stated in the many criteria and ideals of the corporation.

ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Plorida street address of the initial registered agent are:

Dilcia Marinez

11860 S.W. 18 Terrace # 100

Miami, FL 33175

ARTICLE VI INCORPORATOR(S).

The name(s) and address of the Incorporator(s) of these Articles of Incorporation are:

Dilcia Marinez

11860 S.W. 18 Terrace #

Miami, FL 33

Luis Frias

8846 S.W. 72 Street, apt. H-351

Miami, FL 33173

Signature/Incomporator

(An additional article must be added if an effective date is requested.)

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 fluither 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