

NO 300000 4766

(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:

Doris GAVE

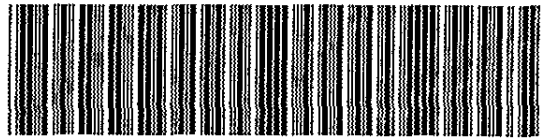
AUTHORIZATION BY PHONE TO

CORRECT Art. I + IV address

DATE 6/5

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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## TRANSMITTAL LETTER

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

**SUBJECT:** ANGEL TASK TEAM MINISTRIES, INC.  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

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  
Filing Fee  
& Certified Copy

☐ \$87.50  
Filing Fee,  
Certified Copy  
& Certificate

**ADDITIONAL COPY REQUIRED**

**FROM:** DORIS LATORRE  
Name (Printed or typed)

11274 S.W. 189 LANE  
Address

MIAMI, FLORIDA 33157  
City, State & Zip

305-3789532  
Daytime Telephone number

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

**ARTICLES OF INCORPORATION**

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

**ARTICLE I NAME**

The name of the corporation shall be:

ANGELS TASK TEAM MINISTRIES, INC.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business and mailing address of this corporation shall be:

11800 S.W. 186 Street, Miami, Fl. 33177.

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Non denomination Christ centered youth out reach ministry.

**ARTICLE IV MANNER OF ELECTION**

The manner in which the directors are elected or appointed:

The manner in which the directors are elected is as stated in the bylaws.

**ARTICLE V INITIAL DIRECTORS/OFFICERS**

The name(s), address(es) and title(s):

Reverend Victor Michael Rivera- 11800 S.W. 186 Street, Miami, Fl. 33177-Director

Martha Isabel Moreno- 11800 S.W. 186 Street, Miami, Fl. 33177-Director

Gladys Sherrie Rivera- 11800 S.W. 186 Street, Miami, Fl. 33177-Secretary

**ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS**

The name and Florida street address of the registered agent is:


Reverend Victor Michael Rivera- 11800 S.W. 186 Street, Miami, Fl. 33177

**ARTICLE VII INCORPORATOR**


The name and address of the Incorporator is:

Reverend Victor Michael Rivera- 11800 S.W. 186 Street, Miami, Fl. 33177

\*\*\*\*\*  
*Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity.*

  
\_\_\_\_\_  
Signature/Registered Agent

5/26/03  
\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Signature/Incorporator

5/26/03  
\_\_\_\_\_  
Date

FILED  
03 MAY 30 PM 4:52  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA