

AD300000 71914

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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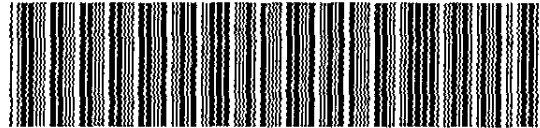
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

TS  
8/25/03

## TRANSMITTAL LETTER

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

**SUBJECT:** ARMONIA Y ABUNDANCIA, 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:** LUIS ORTIZ  
Name (Printed or typed)

901 NW 31 AVE  
Address

MIAMI, FL. 33125  
City, State & Zip

786-356-9396  
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:

ARMONIA Y ABUNDANCIA , INC

### **ARTICLE II PRINCIPAL OFFICE**

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

831 SW 128 CT  
MIAMI, FL. 33184

### **ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

CONTRIBUTE TO THE DEVELOPEMENT OF CULTURAL ,SPIRITUAL, AND  
ECONOMIC TO THE COMMUNITY.  
FUNDS SHALL BE COLLECTED AMONG MEMBERS AND DONATIONS.

### **ARTICLE IV MANNER OF ELECTION**

The manner in which the directors are elected or appointed:

ELECTED AT THE ANNUAL MEETING BY A MAYORITY VOTE.

### **ARTICLE V INITIAL DIRECTORS/OFFICERS**

The name and addresses:

JUAN CARLOS ORTIZ	LUIS ORTIZ	ROSA ARRILA
831 SW 128 CT	901 NW 31 AVE	831 SW 128 CT
MIAMI, FL. 33184	MIAMI, FL. 33125	MIAMI, FL. 33184
(DIRECTOR & SECRETARY)	(DIRECTOR & PRESIDENT )	(DIRECTOR & TREASURER)

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

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

LUIS ORTIZ  
901 NW 31 AVE  
MIAMI, FL. 33125

### **ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

LUIS ORTIZ  
901 NW 31 AVE  
MIAMI, FL. 33125

\*\*\*\*\*  
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

08-06-03  
\_\_\_\_\_  
Date

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

08-06-03  
\_\_\_\_\_  
Date

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03 AUG 21 PM 4:40  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA