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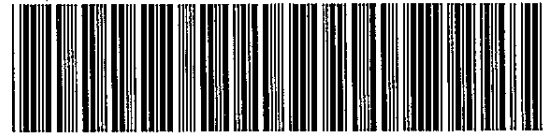
(Business Entity Name)

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RECEIVED  
04 MAR 16 PM 12:42  
DIVISION OF CORPORATION  
FILED  
04 MAR 15 PM 6:48  
STATE OF FLORIDA  
TALLAHASSEE, FLORIDA

js

OFFICE USE ONLY(DOCUMENT #)

**LAZARUS CORPORATE FILING SERVICE**

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**MIAMI, FLORIDA (305)552-5973**

OFFICE USE ONLY

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

- 1. DOMINICAS FRANCESAS ALUMNI-VERITAS,  
(Corporation Name) (Document #)
- 2. INC.  
(Corporation Name) (Document #)
- 3. \_\_\_\_\_  
(Corporation Name) (Document #)
- 4. \_\_\_\_\_  
(Corporation Name) (Document #)

- Walk in     Pick up time 2.00     Certified Copy
- Mail out     Will wait     Photocopy     Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input checked="" type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

STATE OF FLORIDA  
TALLAHASSEE, FLORIDA  
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Examiner's Initials

**ARTICLES OF INCORPORATION**

**FOR Florida Non Profit**

**DOMINICAS FRANCESAS ALUMNI - VERITAS, 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:**

**DOMINICAS FRANCESAS ALUMNI - VERITAS, INC**

**ARTICLE II PRINCIPAL PLACE OF BUSINESS AND MAILING ADDRESS**

**The principal and mailing address of this corporation is:**

**355 Menores Ave.  
Coral Gables FL. 33134,**

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**SECRETARY OF STATE**  
**TALLAHASSEE, FLORIDA**

**ARTICLE III PURPOSE(S)**

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

**The purpose (purposes) for which the corporation is organized is (are): 1) MAINTAIN ON EACH MEMBER PRINCIPLES TAUGHT BY THE FRENCH DOMINICAN SISTERS. 2) STRENGTHEN THE FRATERNAL UNION AMONG FORMER STUDENTS. 3) PROMOTE THE IDEALS OF THE SCHOOL.**

**ARTICLE IV MANNER OF ELECTIONS OF DIRECTORS:**

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

**To be provided for in the 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**

Yakima Fiffe - ANDUEZA  
355 Menores Ave.  
Coral Gables FL. 33134

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

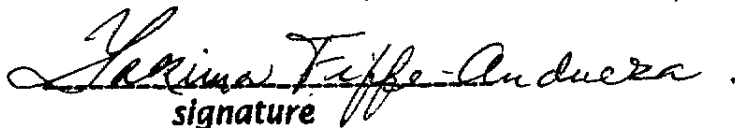
<u>NAME</u>	<u>ADDRESS</u>
Yakima Fiffe - Andueza    PRESIDENT	355 Menores Ave. Coral Gables FL. 33134
Carmen Rodriguez - Arana    VICE-PRESIDENT	1650 S. Lejune Rd. # 304 C Gables FL. 33134
Ernestina Alvarez    TREASURER	4040 Palmarito St. C. Gables FL. 33146
Ma.Elena Sust -Gonzalez    SECRETARY	2745 S.W. 10 Terr. Ap.2 Miami FL. 33135

**ARTICLE VIII INCORPORATOR**

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

Yakima Fiffe - ANDUEZA  
355 Menores Ave.  
Coral Gables FL. 33134

*The undersigned incorporator has executed these Articles of Incorporation this \_\_\_ day of \_\_\_\_\_, 20\_\_.*

  
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.

The name of the corporation is:

DOMINICAS FRANCESAS ALUMNI - VERITAS, INC.  
(must include suffix)

The name and address of the registered agent and office is:

YAKIMA FIFFE-ANDUEZA  
(name)

355 MENORES AVE.  
(P.O. Box or Mail Drop Box NOT Acceptable)

CORAL GABLES, FL 3313  
(City/State/Zip)

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STATE  
TALLAHASSEE, FLORIDA

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.

*Yakima Fiffe Andueza*  
Signature of Registered Agent

\_\_\_\_\_ Date