

No 50000007597

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

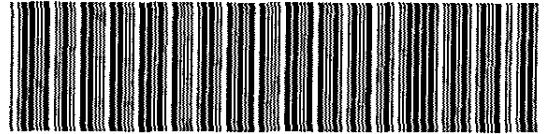
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200057460682

07/22/05--01046--004 **78.75

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2005 JUL 22 P 3:03

FILED

7-25-05
49.

TRANSMITTAL LETTER

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

SUBJECT: Win MAJOR PAGE ORPHANage Corp.
(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: Winelle Pierre Louis Faustin
Name (Printed or typed)

P.O. Box 51782
Address

SARASOTA FL 34232
City, State & Zip

941-587-5583
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:

WIN MAJOR PAGE ORPHANAGE C

ARTICLE II PRINCIPAL OFFICE

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

81 CHATULIER MIRBALAIS HAITI

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To Help the unfortunated Kid To go To school
by uniform and book in the Future Have a library

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:

By the Majority vote of the Members

ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS

List name(s), address(es) and specific title(s):

Winelle Pierre Louis Faustin Director
Winmeier Faustin Asst. Director
Winette Jean Gilles Treasure
PATRICE Dorismond Vice Pres

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

3870 Greenway Dr #505
SARASOTA FL 34232

Winelle P. L. Faustin

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Winelle Pierre Louis Faustin
P.O. Box 51782 SARASOTA FL 34232

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.

Winelle P. L. Faustin
Signature/Registered Agent

7/15/05
Date

Winelle P. L. Faustin
Signature/Incorporator

7/15/05
Date

FILED
2005 JUL 22 P 3 03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA