

NO6000002286

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

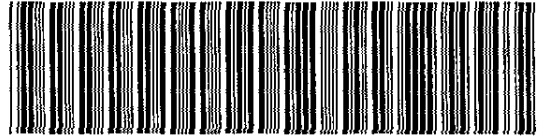
(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only

D. WHITE MAR - 1 2006



000066464340

02/28/06--01036--016 \*\*78.75

FILED

06 FEB 28 PM 3:08

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

REC'D 2/28/06

06 FEB 28 PM 11:21

DIVISION OF CORPORATIONS

**LAZARUS  
CORPORATE FILING SERVICE**

**3320 SW 87<sup>TH</sup> AVENUE**

**MIAMI, FL 33165 (305) 552-5973**

Office Use Only

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

1. Angel HANDS FOUNDATION INC.  
(Corporation Name) (Document #)

2. \_\_\_\_\_  
(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**

☒ Profit  
☐ Not for Profit  
☐ Limited Liability  
☐ Domestication  
☐ Other

**OTHER FILINGS**

☐ Annual Report  
☐ Fictitious Name

**AMENDMENTS**

☐ Amendment  
☐ Resignation of R.A., Officer/Director  
☐ Change of Registered Agent  
☐ Dissolution/Withdrawal  
☐ Merger

**REGISTRATION/QUALIFICATION**

☐ Foreign  
☐ Limited Partnership  
☐ Reinstatement  
☐ Trademark  
☐ Other

Examiner's Initials \_\_\_\_\_

FILED

06 FEB 28 PM 3:09

ARTICLES OF INCORPORATION

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FOR

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:

*Angel Hands Foundation Inc.*

ARTICLE II PRINCIPAL PLACE OF BUSINESS AND MAILING ADDRESS

The principal and mailing address of this corporation is:

*300 Bay view Dr. #1506, Sunny Isles Beach  
Florida, 33160.-*

ARTICLE III PURPOSE (S)

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

*Charitable and Educational purposes within the  
meaning of section 501 (c) (3) of the IRS, code  
of 1986 and to provide Health care services to the Commu-  
nities.*

ARTICLE IV MANNER OF ELECTIONS OF DIRECTORS:

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

*By The Bylaws.*

## 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

Nayibe Noa - 300 Bay view Dr  
# 1506, Sunny Isles Beach 33160, FL.

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

- Nayibe Noa, Jesus D. Ortiz,  
Hugo Urdaneta.  
300 Bay view Dr #1506 Sunny Isles Beach  
33160 - FL -

## ARTICLE VIII INCORPORATOR

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

Nayibe Noa  
300 Bay view Dr. #1506, Sunny Isles Beach  
33160 FL.

The undersigned incorporator has executed these Articles of Incorporation this 27 day of Feb, 2006

  
signature

FILED

06 FEB 28 PM 3:09

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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:

Angel Hands Foundation Inc.  
(must include suffix)

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

Nayibe Noa  
(name)

300 Bay view Dr. # 1506  
(P.O. Box or Mail Drop Box NOT Acceptable)

Sunny Isles Beach 33160 FL  
(City/State/Zip)

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 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.

[Signature]  
Signature of Registered Agent

02/27/06  
Date