

NO60000008040

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

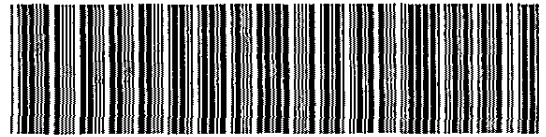
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600077903916

07/28/06--01021--013 **87.50

FILED
06 JUL 28 AM 8:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

8/1/06

COVER LETTER

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

SUBJECT: Mundillo en Orlando 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: Jorge García
Name (Printed or typed)

1519 Brook Hollow Drive
Address

Orlando, Florida 32824-6703
City, State & Zip

321-217-0697
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:
Mundillo en Orlando Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:
1519 Brook Hollow Dr. Orlando, FL. 32824-6703

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Is a non-profit organization organize to educate, conserve, enrich and preserve the beautiful Art of the Bobbin Lace (Mundillo) in its diverse forms. Besides, to estimulate, cultivate and enrich the cultural potential of our artisan skills by promoting the legacy of this art.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:
There shall be annually elected by ballot.

ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS

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

Jorge García 1519 Brook Hollow Dr. Orlando, FL. 32824-6703 President
Lourdes Rodríguez 1930 Sir Lancelot Circle St. Cloud, FL. 34772 Vice-President
Darlene Rodríguez 2474 Augusta Way Kissimmee, FL. 34746 Secretary
Aida Etchegoyen 453 Hunter Circle Kissimmee, FL. 34758 Treasurer

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

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

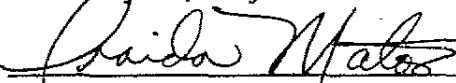
Iraida Matos
109 Dorchester Ct.
Kissimmee, FL. 34758

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

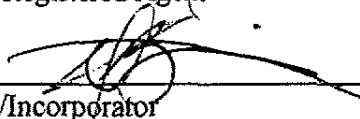
Darlene Rodríguez
2474 Augusta Way
Kissimmee, FL. 34746

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

7/26/06
Date



Signature/Incorporator

7/24/06
Date

FILED
06 JUL 28 AM 8:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA