# NOTOOO

(Re	equestor's Name	
(Ad	ldress)	
(Ad	ldress)	
(Cir	ty/State/Zip/Phor	ie #)
PICK-UP	MAIT	MAIL
(Bu	isiness Entity Na	me)
(Do	ocument Number	)
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	
	Office Use O	nly /
	17	
	_ '/	1/3



200104040182

07/12/07--01024--001 \*\*78.75

RECEIVED
07 JUL 12 AHH: 23

FILED
07 JUL 12 PH 12: 45

### LAZARUS

# CORPORATE FILING SERVICE Requester's Name

3320 S.W. 87<sup>TH</sup> AVENUE

Address

MIAMI, FL 33165 (305) 552-5973
City/State/Zip Phone #

	• Office Use Only			
CORPORATION NAME(S) & DOC	UMENT NUMBER(S), (if known):			
1. ONE WAY INTE	RNATIONAL MINISTRIES IN	VC.		
(Corporation Name)	(Document #)			
2				
(Corporation Name)	(Document #)			
3. (Corporation Name)				
(Corporation Name)	(Document #)			
A				
(Corporation Name)	(Document #)	•		
Walk in Pick up time	2:06 Certified Copy			
☐ Mail out ☐ Will wait	Photocopy Certificate of Status			
NEW FILINGS	AMENDMENTS			
Profit	☐ Amendment	•		
Not for Profit	Resignation of R.A., Officer/Director			
Limited Liability	Change of Registered Agent			
U Domestication	Dissolution/Withdrawal			
U Other ··	☐ Merger			
OTHER FILINGS	REGISTRATION/QUALIFICATION			
Annual Report	☐ Foreign	= :		
Fictitious Name	Limited Partnership			
•	Reinstatement			
	☐ Trademark			
	U Other			
	Examiner's Initials			
CR2E031(7/97)	Examiner 5 initials			

Jul 11 07 02:59p

#### ARTICLES OF INCORPORATION

**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:

One way INTERNATIONAL

ARTICLE II PRINCIPAL PLACE OF BUSINESS AND MAILING ADDRESS

The principal and mailing address of this corporation is 8370 W FLacker 87 Soit 222 miami FL 33144

#### **ARTICLE III PURPOSE (S)**

The specific purpose(s) for which the corporation is organized is (are): WE WILL Provide services for THE mind, body and spirit, including but not limited to education, counseling, buying, selling, men toring and anything legal, ethical, and moral to help the community have a happier, and better quality of life ARTICLE IV MANNER OF ELECTIONS OF DIRECTORS:

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

By 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 INITIA	L REGISTERED	<b>AGENT AN</b>	D STREET	ADDRES!
DORA	Bimm	relis	d	

8370 W FLabler ST But 222 migmi, F1 33144

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

DORA BIMMELIS PRESIDENT DERGIO BETANOUT VICE- PRESIDENT SERGIO A BETANOUT SECRETARY SERGIO A BETANOUT ST SUIT 272 8370 W. Flagler St SUIT 272

ARTICLE VIII INCORPORATOR

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

DORA BIMMELIS 8370 W FLAGIER SOIT 222 MIAMI FI 33144

The undersigned incorporator has executed these Articles of Incorporation this 3 day of \_\_\_\_\_\_\_, 200.

## 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:

The name of the corporation is.
ONE WAY INTERNATIONA MINISTRIE
nust includes suffix)
The name and address of the registered agent and office is:
DORA Bimmelia
(name)
8370 W FLaslerst suit 222
(P.O. Box or Mail Drop Box NOT Acceptable)
Miami, F/ 33144 (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 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.
01-03-6-1 7. PM
Signature of Registered Agent  Date  F. FLORID.  Signature of Registered Agent  Date  F. FLORID.  Date  F. FLORID.