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Annual Report	Foreign Limited Partnership Reinstatement
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Examiner's Initials

# ARTICLES OF INCORPORATION

#### FOR

MANOS AMIGAS, CORP.

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:

MANOS AMIGAS, CORP.

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

The principal and mailing address of this corporation is:

8179 NW 8th ST #B-2, MIAMI, FL. 33126

#### ARTICLE III PURPOSE (S)

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

VOLUNTARY GROUP FOR PREVENTION AND SUPPORT FOR THOSE INFECTED WITH HIV (AIDS)

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

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

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

GLORIA POLLARD / 8179 NW 8th ST #B-2 MIAMI, FL. 33126

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

GLORIA POLLARD/ 8179 NW 8th ST #B-2 Miami, FL. 33126 OMAR VALDIVIA / 8179 NW 8th ST #B-2 Miami, FL. 33126

JAQUELINE PEREZ BERMUDEZ / 8179 NW 8th ST #B-2 Miami, FL. 33126

ARTICLE VIII INCORPORATOR

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

GLORIA POLLARD / 8179 NW 8th ST #b-2 Miami, FL. 33126

The undersigned incorporator has executed these Articles of Incorporation this 20 day of February \_\_\_\_, 2009

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/REGISTERERD AGENT, IN THE STATE OF FLORIDA.

The name of the corporation is:

	S AMIGAS, CORP.	
(	must includes suffix)	

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

GLORIA POLLARD	•
(name)	IN OG
8179 NW 8th ST #B-2	E E E
(P.O. Box or Mail Drop Box NOT Acceptable)	
MIAMI, FL. 33126	E. FL
(City/State/Zip)	05 DRIDA

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.

**Registered Agent** 

2/20/09 Date