# N10000005931

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SECRETARY OF STATE
SECRETARY OF STATE

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# **COVER LETTER**

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

SUBJECT: BIS	SAYAN CONNECTION (PROPOSED CORPORAT	N, INC., JACKSON' Ename- <u>must inclu</u>	VILLE CHAPTER DE SUFFIX)
Enclosed is an original  \$70.00  Filing Fee	and one (1) copy of the Artic  78.75  Filing Fee &  Certificate of  Status	S78.75 Filing Fee & Certified Copy	a check for:  \$87.50 Filing Fee, Certified Copy & Certificate
		ADDITIONAL CO	PY REQUIRED
FROM	LEONORA PERRON Name (Pri	inted or typed)	-
	4918 PARK STREET	ddress	-
	PANAMA CITY, FL 324	404 State & Zip	-

NOTE: Please provide the original and one copy of the articles.

E-mail address: (to be used for future annual report notification)

Daytime Telephone number

850-258-3432

lperron54@yahoo.com

# ARTICLES OF INCORPORATION

In Compliance with Chapter 617, F.S., (Not for Profit)

### ARTICLE I NAME

The name of the corporation shall be:

BISAYAN CONNECTION, INC., JACKSONVILLE CHAPTER

# 10 JUN 18 PM 1: 35 SECRETARY OF STATE TALLAHASSEE FLORIDA

### ARTICLE II PRINCIPAL OFFICE

The principal <u>street</u> address and mailing address, if different is: 4918 PARK STREET, PANAMA CITY, FL 32404 -mailing 8543 CHADWELL CT., JACKSONVILLE, FL 32244- principal

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To function as a charitable organization for the benefit of the community at large, promote intercultural development and to acquaint the community at large of our coustoms and tradition; undertake projects, education and enterprises intended to improve the economic, social and cultural well being of all the members of the organization.

### ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:

By majority votes of members

# ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS

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

President, Isabel Hartsell-8543 Chadwell Ct., Jacksonville, FL 32244 Vice President, Lydia Rosete- 8543 Chadwell Ct., Jacksonville, FL 32244 Director, Dr. Mechore Carbonell - 8089 Misty Meadow Ct., Jacksonville, Fl 32210

## ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

The <u>name and Florida street address</u> (P.O. Box NOT acceptable) of the registered agent is: Leonora S Perron - 4918 Park Street, Panama City, FI 32404

### ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is: Leonora S Perron - 4918 Park Street, Panama City, FI 32404

**************	**********
Having been named as registered agent to accept service of procing this certificate, I am familiar with and accept the appointment	
Linos 5 Pina	6-16-200
Signature/Registered Agent	Date
Lunos - Jun	6-16-2010
Signature/Incorporator	Date