

N1 00000010538

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H10000244148 3)))



H100002441483ABCY

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

RECEIVED
10 NOV 10 AM 11:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

To:

Division of Corporations
Fax Number : (850) 617-6381

From:

Account Name : EMPIRE CORPORATE KIT COMPANY
Account Number : 072450003255
Phone : (305) 634-3694
Fax Number : (305) 633-9696

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

FLORIDA PROFIT/NON PROFIT CORPORATION

~~FOLKLORIC GROUP PURE CHILE OF MIAMI, INC.~~

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

Grupo Folklorico Puro Chile de Miami, Inc.

Electronic Filing Menu

Corporate Filing Menu

Help

<https://efile.sunbiz.org/scripts/efilcovr.exe>T. Burch NOV 12 2010
11/9/2010



November 10, 2010

FLORIDA DEPARTMENT OF STATE
Division of Corporations

EMPIRE

SUBJECT: FOLKLORIC GROUP PURE CHILE OF MIAMI, INC.
REF: W10000052660

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Please remove the spanish translation from Article I if filing the entity name in english.

If you have any further questions concerning your document, please call (850) 245-6901.

Pamela Smith
Regulatory Specialist II
New Filing Section

FAX Aud. #: H10000244148
Letter Number: 010A00026454

P.O BOX 6327 - Tallahassee, Florida 32314

H10000244148

COVER LETTER

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

SUBJECT: Grupo Folklorico Puro Chile de Miami, 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: Jaime Cuevas
Name (Printed or typed)

11602 S'W 81 Road
Address

Miami, FL 33156
City, State & Zip

305 300-4041
Daytime Telephone number

renejc@bellsouth.net
E-mail address: (to be used for future annual report notification)

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

H10000244148

H10000244148

ARTICLES OF INCORPORATION
In compliance with Chapter 617, F.S., (Not for Profit)

ARTICLE I NAME

The name of the corporation shall be: Grupo Folklorico Puro Chile De Miami, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address
11602 SW 81 Road
Miami, FL 33156

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Typical Chilean folklore music, dancing and theatrical presentations

ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected and appointed:

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Jaime Cuevas-President
Address: 11602 SW 81 Road
Miami, FL 33156

Name and Title:
Address:

Name and Title: Luis Soto- VP
Address: 2670 SW 30 Ave
Miami, FL 33145

Name and Title:
Address:

Name and Title: Angelica Martinez-Sec/Treas
Address: 500 NW 109 Ave 2
Miami, FL 33172

Name and Title:
Address:

ARTICLE VI REGISTERED AGENT

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

Name: Jaime Cuevas
Address: 11602 SW 81 Road
Miami, FL 33156

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Jaime Cuevas
Address: 11602 SW 81 Road
Miami, FL 33156

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

Required Signature of Registered Agent

Date:

11/09/2010

I submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Required Signature of Incorporator

Date

11-09-2010

H10000244148