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(Requestor's Name)						
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PICK-UP	☐ WAIT	MAIL				
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(Document Number)						
Certified Copies	Certificates	of Status				
Special Instructions to Filing Officer:						
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MUNDAY OF STATE

T. Burch NOV 2 3 2010

COVER LETTER

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

SUBJECT: PREVENTION AND HUMANITARIAN AID FOUNDATION					
		(PROPOSED CORPORA	ATË NAME – <u>MUST INCLI</u>	UDE SUFFIX)	
Enclosed is a \$70.0 Filing	0	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate	
			ADDITIONAL C	OPY REQUIRED	

FROM: Antonio Artiles. M.

Name (Printed or typed)

15430 SW 74 Circle. CT. #505

Address

Miami, Florida 33193

City, State & Zip

(786) 537-9328

Daytime Telephone number

phafundation@gmail.com

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

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



RECEIVED 10 NOV 22 PM 12: 31

FLORIDA DEPARTMENT OF STATE HASSEE. FLORIDA Division of Corporations

November 3, 2010

ANTONIO ARTILES M. 15430 SW 74 CIRCLE CT #505 MIAMI, FL 33193

SUBJECT: PREVENTION AND HUMAITARIAN AID FOUNDATION P.H.A.F.

Ref. Number: W10000051562

We have received your document for PREVENTION AND HUMAITARIAN AID FOUNDATION P.H.A.F. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name must contain a word that will clearly indicate that it is a corporation. This word may be: CORPORATION, CORP., INCORPORATED, or INC. Sections 617.0401(1)(a) and 617.1506(1), Florida Statutes, prohibits the use of the word COMPANY or CO. in the name of a non-profit corporation.

Entities may file using only the entity's name. Please delete any reference to the "doing business as name" in your document. If you wish to register your fictitious name, you may do so by filing an application and submitting the appropriate fees to this office.

The registered agent must sign accepting the designation.

A corporation may not act as its own incorporator. Please designate an individual, another active domestic or foreign corporation, with a street address.

An effective date <u>may</u> be added to the Articles of Incorporation <u>if a 2011 date is needed</u>, otherwise the date of receipt will be the file date. <u>A separate article must be added to the Articles of Incorporation for the effective date.</u>

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6928.

Tim Burch Regulatory Specialist II New Filing Section

Letter Number: 210A00025920

ARTICLES OF INCORPORATION

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

PREVENTION AND HUMANITARIAN AID FOUNDATION. CORP.

ARTICLE II	Principal street address			iling address, if different is:	
	15430 SW 74 Circle, CT. #505	- -			
	Miami, Florida 33193	_			
ARTICLE III	PURPOSE				
	hich the corporation is organized is:			NOW YOUR	
	the culture of natural disasters preven	antion in the	nonulation to help hefe		
ofter the disa	sters, through the research of new te	chniques to	apply them to national	and international	
evels. As we	ll as collaborating with humanitarian	aid when nat	ural disaster strikes.	25, ≥ (
				~~~	
RTICLE IV	MANNER OF ELECTION The manner in	which the directe	ors are elected and appointed:	<u> </u>	
The Directors	s were elected by vote.			§ 50	
ARTICLE V	INITIAL OFFICERS AND/OR DIRECTO	RS			
Name and T	itle: Antonio Artiles, M. President,	Name and Tit	le: Karina Matheus. Director		
Address:	15430 SW 74 Circle, CT. # 505	_ Address:	2660 SW 37th Av # 70		
	Miami, Florida 33193	_	Miami, Florida 33133		
		_			
Name and T	itle:Noris. m. Rodriguez. Vice president.	_ Name and Ti	tle:		
Address:	15430 SW 74 Circle, CT. # 505	Address:			
	Miami, Florida 33193	_			
		<del></del>		<del></del>	
Name and T	itle: Ennar. G. Arriojas. Vice president.	Name and Ti	tle:		
Address:	Edif, Dispensario Adventista, ofic: ADR				
	Av. Sur 4 Quinta Crespo, Caracas 1010				
	Venezuela.	_			
ARTICLE VI	REGISTERED AGENT				
	orida street address (P.O. Box NOT acceptable) o	f the registered a	gent is:		
Name:	Noris, M. Rodriguez	_	<b>B</b> •····		
Address:	15430 SW 74 Circle, CT, # 505	_			
	Miami, Florida 33193				
		<del></del>			
ARTICLE VII	INCORPORATOR				
	dress of the Incorporator is:				
	Antonio Artiles, M.				
Address:	15430 SW 74 Circle, CT. # 505	_			
	Miami, Florida 33193	_			
		<del></del>			
Tavina kaan nan	ned as registered agent to accept service of proc	ess for the above	o stated corporation at the p	laca designated in thi	
	miliar with and accept the appointment as registe			ace aesignatea in inc	
		-	, <b></b>		
	Nous trusts.		11/11	/2010	
	Required Signature of Registered Agent	<del></del>		ate	
	iment and affirm that the facts stated herein are			bmitted in a documen	
o the Departmen	t of State constitutes a third degree felony as provi	ded for in s.817	155, F.S.		
	-· <del>-</del>			1/0010	
	a outiles. u.			1/2010	
Required Signature of Incorporator			Ľ	Date	