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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

κ 03/30/11

W11-14070



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED
11 MAR 28 PM 1:19

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

March 11, 2011

SHAY ALAMO
1872 FAYETTEVILLE AVE.
DELTONA, FL 32725

SUBJECT: HOUSE OF MIRACLES WHERE MIRACLES HAPPEN
Ref. Number: W11000014070

We have received your document for HOUSE OF MIRACLES WHERE MIRACLES HAPPEN and your check(s) totaling \$87.50. 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.

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) 245-6949.

Thomas Chang
Regulatory Specialist II
New Filing Section

Letter Number: 411A00006046

COVER LETTER

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

SUBJECT: House of Miracles Where Miracles Happen, 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: Shay Alamo
Name (Printed or typed)

1872 Fayetteville Ave.
Address

Deltona, Florida 32725
City, State & Zip

386-960-4477
Daytime Telephone number

shayalamo@ymail.com
E-mail address: (to be used for future annual report notification)

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

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be: House Of Miracles Where Miracle Happen, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address
1872 Fayetteville Ave
Deltona, Florida 32725

Mailing address, if different is:
P.O. Box 6448
Deltona, Florida 32728

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Exclusively for charitable purposes. To advocate and encourage projects in the community. To plan and produce programs, projects and other activities, such as: Food Pantry, housing assistance, re-training, mentoring, clothing shop, utilities assistance and homeless help for men and women. Help and support disabled individuals. Provide various educational workshops and seminars for abused and domestic violence victims.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected and appointed:

The initial officers shall be appointed by the President and all subsequent Officers, Directors and Trustees shall be selected as outlined in the BYLAWS.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Shay Alamo, President/Treasurer
Address: 1872 Fayetteville Ave.
Deltona, Florida 32725

Name and Title: _____
Address: _____

Name and Title: Carmen Santiago, Vice President
Address: 4620 Cason Cove Drive 701
Orlando, Florida 32811

Name and Title: _____
Address: _____

Name and Title: Fermina Alamo, Secretary
Address: P.O. Box 6448
Deltona, Florida 32728

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: Shay Alamo
Address: 1872 Fayetteville Ave.
Deltona Florida 32725

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TALLAHASSEE, FLORIDA

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Janice Hanley
Address: P.O. Box 952375
Lake Mary, Florida 32795-2375

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

Shay L. Alamo
Required Signature of Registered Agent

3/24/11
Date

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.

Janice Hanley
Required Signature of Incorporator

3/24/2011
Date