

N11000011408

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

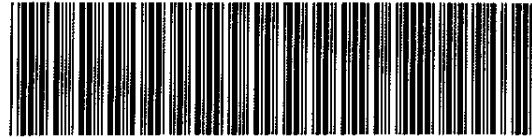
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

11 DEC -9 PM 5:11

APPROVED
AND
FILED

COVER LETTER

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

SUBJECT: VUELTA a LA VIDA, 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: Pastor Efraín Rosario

Name (Printed or typed)

3324 NW 16th Ave

Address

Pompano Beach, FL 33064

City, State & Zip

954.972.9555 - 754.281.8379

3324 NW 16th Ave Telephone number

ministeriovueltaalavida@hotmail.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 VUELTA a LA VIDA, INC.
The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE

Principal street address
3324 NW 16th Ave
Pompano Beach, FL 33064

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To assist people with substance abuse+mental health as well as spiritual needs & issues and deal with their situations and provide them with deliverance, hope, recovery and salvation of their souls, which is through Jesus Christ and Jesus Christ only.

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

Directors are appointed and elected based on their experience and dedication to their ministry.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Pastor Efrain Rosario, Director
Address: 3324 NW 16th Ave
Pompano Beach, FL 33064

Name and Title: _____
Address: _____

Name and Title: Dora Rivera Torres, Secretary
Address: 3324 NW 16th Ave
Pompano Beach, FL 33064

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

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: Dr. Sonia Pimentel
Address: 3324 NW 16th Ave
Pompano Beach, FL 33064

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Pastor Efrain Rosario
Address: 3324 NW 16th Ave
Pompano Beach, FL 33064

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

December 6, 2011

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.



Required Signature of Incorporator

December 6, 2011

Date

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

APPROVED
AND
FILED

ARTICLE I NAME

The name of the corporation shall be: **VUELTA a LA VIDA, INC.**

11 DEC -9 PM 5:12

ARTICLE II PRINCIPAL OFFICE

Principal street address
3324 NW 16th Ave
Pompano Beach, FL 33064

Mailing address, if different is:
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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Name and Title: Pastor Efraín Rosario, Director
Address: 3324 NW 16th Ave
Pompano Beach, FL 33064

Name and Title: _____
Address: _____

Name and Title: Dora Rivera Torres, Secretary
Address: 3324 NW 16th Ave
Pompano Beach, FL 33064

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

ARTICLE VI REGISTERED AGENT

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

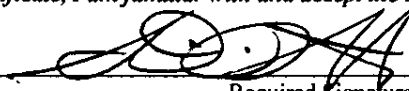
Name: Dr. Sonia Pimentel
Address: 3324 NW 16th Ave
Pompano Beach, FL 33064

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The name and address of the Incorporator is:

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Pompano Beach, FL 33064

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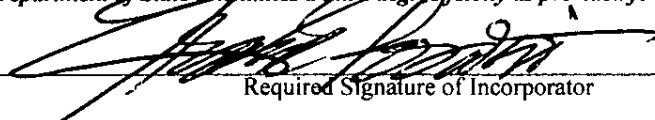


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