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DIVISION OF CORPORATIONS

**COVER LETTER**

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

**SUBJECT:** Doral Preparatory Academy, 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:** Luis Machado  
Name (Printed or typed)

305 Alcazar Ave Suite 3  
Address

Coral Gables, FL 33134  
City, State & Zip

305-447-1776  
305 Alcazar Ave Suite 3 Telephone number

jpilar@renegadeinvest.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** Doral Preparatory Academy, Inc.  
The name of the corporation shall be:

**ARTICLE II PRINCIPAL OFFICE**

Principal street address  
305 Alcazar Ave Suite # 3  
Coral Gables, Florida 33134

Mailing address, if different is:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

This corporation is organized and shall be operated exclusively as a corporation not-for-profit and for charitable and educational purposes under section 501(c)(3) of the Internal Revenue Code of 1986, as amended, and the Treasury Regulations issued thereunder, or the corresponding provisions of any future United States Internal Revenue Law (the "Code").

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

By the board of Directors

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Luis Machado  
Address: 305 Alcazar Ave Suite # 3  
Coral Gables, FI 33134

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_

Name and Title: Ana M. Machado  
Address: 305 Alcazar Ave Suite # 3  
Coral Gables, FI 33134

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_

Name and Title: Junarda Gonzalez Benitez  
Address: 305 Alcazar Ave Suite # 3  
Coral Gables, FI 33134

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: Luis Machado  
Address: 305 Alcazar Ave Suite # 3  
Coral Gables, FI 33134

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Junarda Gonzalez Benitez  
Address: 305 Alcazar Ave Suite # 3  
Coral Gables, FI 33134

12 MAY 29 PM 12:22  
FILED  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

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

May 25, 2012  
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.

Junarda Gonzalez Benitez  
Required Signature of Incorporator

May 25, 2012  
Date