

NI 20000007095

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

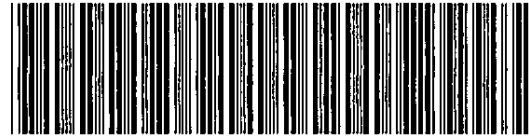
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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12 JUL 20 PM 2:06

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COVER LETTER

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

SUBJECT: United Domino Federation, 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: Rafael Rivera

Name (Printed or typed)

3920 Creswick Circle

Address

Orlando, FL, 32829

City, State & Zip

321-231-6751

Daytime Telephone number

kdcraft@yahoo.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: **United Domino Federation, INC.**

ARTICLE II PRINCIPAL OFFICE

Principal street address

244 E. Oakridge RD
Orlando, FL 32809

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12 JUL 20 06
Mailing address, if different is

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

This Corporation is formed to serve as the parent of regional and national organized social clubs who promote the sport or hobby of domino for recreation and pleasure. The Corporation shall have a membership and shall be open to individuals of any race, color, religion or gender. This Corporation shall be formed under guidelines of the Internal Revenue Code Section 501(c)(7).

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected and appointed:

The Directors are elected by vote for all eligible members of the Corporation.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Eduardo Moscat /P
Address: 244 E. Oakridge RD
Orlando, FL 32809
emoscat62@yahoo.com

Name and Title: Rafael Rivera /S
Address: 3920 Creswick Circle
Orlando, FL 32829
kdcraft@yahoo.com

Name and Title: Juan Aviles / VP
Address: 15120 County Lane Rd
Spring Hill, FL 34610
sprnhilldominoclub@yahoo.com

Name and Title: Karel Torres /SS
Address: 12401 Blacksmith Dr APT 107
Orlando, FL 32837
torreskarel@aol.com

Name and Title: Domingo Quiroz /T
Address: 853 Hacienda CR
Kissimmee, FL 34741
quirozpadre@live.com

Name and Title: Ellyha Torres /ST
Address: 12217 Bohannon BLVD
Orlando, FL 32824
ellyhatorres@gmail.com

ARTICLE VI REGISTERED AGENT

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

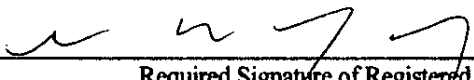
Name: Gloria M. Rivera
Address: 3920 Creswick Circle
Orlando, FL 32829

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Rafael Rivera
Address: 3920 Creswick Circle
Orlando, FL 32829

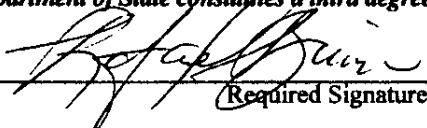
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity


Required Signature of Registered Agent

July 17, 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.


Required Signature of Incorporator

July 17, 2012

Date