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COVER LETTER

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

STEL	LA INTERNATIO		•	
	(PROPOSED CORPORAT			
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	87.50 Filing Fee, Certified Copy & Certificate	
FROM: CLAUDIA PERDOMO OCAMPO Name (Printed or typed)				
5652 NW 101 CT Address				
DORAL, FL. 33186 City, State & Zip				
786-486-7475 5361 NW Paytime Telephone number				

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

CLAUDIA.OCAMPO.P@GMAIL.COM E-mail address: (to be used for future annual report notification)

ARTICLES OF INCORPORATION

In compliance with Chapter 617, F.S., (Not for Profit)
STELLA INTERNATIONAL FOUNDATION, INC

ARTICLE I	NAME STELLA INTERNAT	TIONAL FO	UNDATION, INC.
	orporation shall be:		FILED
ARTICLE II	PRINCIPAL OFFICE		10 MOV 21 AM U. 10
	5361 NWringipal street address		Mailing address, if different is:
	DORAL, FL. 33166		SKORETARY OF STATE
	AP 4 - 14 - 1		TÄLLÄHASSEE, FLOREIA
ADDICE D IV	ntmpoor		
ARTICLE III	PURPOSE		
philanthropic, no Jeneerating a po	で紹立はALEEDSTELEの報告においます。 n-profit, created for eduactional purposes to sitive social impact and contributing to susta urces for programs and projects of the Civil S	promote social : inable human a	and welfare purposes with the aim of nd social development, providing
ARTICLE IV BY VOT	MANNER OF ELECTION The manner in VEOR THE BOARD	which the directors	s are elected and appointed:
ARTICLE V	INITIAL OFFICERS AND/OR DIRECTO	<u>rs</u>	ACAMOO DERIDONO OLANDO DIDECTO
Name and T	CARRERA 13 # 4457 OFFICE 401	Transcand True.	OCAMPO PERDOMO, CLAUDIA - DIRECTOR
Address:	BOGOTA, COLOMBIA	Address:	DORAL, FL. 33186
	***************************************	-	
Nome and T	itleUERRERO CUELLAR, ANGEL Y - SECRETARY	- NT 1 TP:41-	HOLLOBAUGH, LILIANA - DIRECTOR
Address:	5652 NW 101 CT	Address:	5652 NW 101 CT
rida ess.	DORAL, MIAMI, FL. 33186	_ Address.	DORAL, FL. 33186
		.	
Name and T	itleOROZCO RODRIGUEZ, LUIS S - TREASURER	Name and Title	: CANAVERA GIRALDO, EPHRAIM - DIRECTOR
Address:	AVE 46 PONIENTE	Address:	EUGENIO AGUIRRE BENAVIDES NTE. 657
	COL. MORELOS CENTRO		CENTRO
	TORREON, COAH MEXICO	-	TORREON, COAH, MEXICO
ARTICLE VI	REGISTERED AGENT		
	orida street address (P.O. Box NOT acceptable) of	the registered ager	nt is:
Name:	CLAUDIA OCAMPO PERDOMO	•	
Address:	5652 NW 101 CT	-	
	DORAL, FL. 33186	-	
		•	
ARTICLE VII	INCORPORATOR dress of the Incorporator is:		
Name:			
Address:	LILIANA HOLLOBAUGH 5652 NW 101 CT		
	DORAL, FL. 33186	•	
		•	
certificate, I am fa	ed as registered agent to accept service of proces miliar with and accept the appointment as registere	d agent and agree	tated corporation at the place designated in this e to act in this capacity
		T	-10/04/2<u>0</u>12
	Required Signature of Registered Agent		Date
I submit this docu to the Department	ment and affirm that the facts stated herein are true of State constitutes a third degree felony as provide	ie. I am aware thi d for in s.817.155	at any false information submitted in a document , F.S.
<i>-</i> }	Required Signature of Incorporator		-10/04/281.2
U	v@mren pignarme or incorbotator	/	. J. J – Bale