#2204 P.001/003

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	Division of Corporations	,	ក៏ប្រ	R	-
	Fax Number : (850)617-6381	Ç	id 141 br ~4.£3		CHIVE
From:	<del>-</del>	` <u>`</u>			****
	Account Name : LAZARUS CORPORATE FILING SERVICE, Account Number : I20000000019	INC.	3.0	<del>ф</del>	
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January 4, 2013

## FLORIDA DEPARTMENT OF STATE Division of Corporations

**LAZARUS** 

SUBJECT: SAINT JOSEPH FOUNDATION CORP

REF: W13000000739

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The document submitted does not meet legibility requirements for electronic filing. Please do not attempt to refax this document until the quality has been improved.

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) 245-6052.

Valerie Herring Regulatory Specialist II New Filing Section

FAX Aud. #: H13000001694 Letter Number: 313A00000245

## H13000001694

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

	Principal street address		Mailing address, if different is:			
	1424 NW 150TH AVE	<del></del> .			-	
	PEMBROKE PINES, FL. 33026					
RTICLE III	PURPOSE	•				
ne purpose for wi	nich the corporation is organized is:					
O BUILD A	FAMILY RENEWAL CENTER RE	ETREAT HOUSE	Ē			
	•	•	•			
				·		
RTICLE IV	MANNER OF ELECTION The man	ner in which the directo	ors are elected and appointed:			
Y DIRECTORS	•	•	•			
Name and Ti	INITIAL OFFICERS AND/OR DIRE	CTORS Name and Tit	Jet JUAN CARLOS CASTANEDA-D	•		
Address:	1424 NW 169TH AVE	Address:	1790 GW 54TH ST			
	PEMBROKE PINES, FL. 33028		MIRAMAR, FL \$3029			
		<del></del>		<del> </del>		
Name and Ti	itle: NOEMARI ZAYAS PABON-D	Name and Tr	tle: DIOGENES GRULLON-O			
Address:	4445 SW 160TH AVE APT 205	Address:	18269 SW 3RD ST	<del></del>		
	MIRAMAR, FL 33027		PEMBROKE PINES, FL. \$3029			
Manne and Ti	ILIC: ROMELINA PERALTA-O	 Name and Ti	tle-	•		
Address:	17911 SW 18TH ST.	Address:	ue	200	ᅅ	
7 EWGE COM	NIRAMAR, FL 33029				<u></u>	
				4	7.	
RTICLE VI	REGISTERED AGENT			5E	+-	
he name and Ek	rida street address (P.O. Box NOT accept	able) of the registered	agent is:	გ		
Name:	CAROLINA MALPICA			<u> "'Q</u>	AM II: 5	
Address:	1424 NW 159TH AVE			. E.		
	PEMBROKE PINES, FL. 33028	<del></del>		성선	<del></del>	
		<del></del>		高無	ក្ប	
٠.			-	>'``	-	
RTICLE VII	INCORPORATOR					
	INCORPORATOR					
	INCORPORATOR  dress of the Incorporator is;  CAROLINA MALPICA		•			
he <u>name and ad</u>	dress of the Incorporator is:	·	•			
Name:	dress of the Incorporator is; CAROLINA MALPICA					