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SECRETARY OF STATE FAIL AHASSEE, FLORIDA

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COVER LETTER

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

Sociedad Para el Desarrollo de La Musica Religiosa Cubana, 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 \$78.75

\$87.50

Status

Filing Fee & Certified Copy Filing Fee, Certified Copy

& Certificate

ADDITIONAL COPY REQUIRED

Ernesto M. Rubi

Name (Printed or typed)

1395 Brickell Avenue, Suite 700

Address

Miami, FL 33195

City, State & Zip

Daytime Telephone number

miamiguy006@gmail.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)

The name of the	he corporation shall be: Sociedad Para	el Desarrollo	de la Music	ca Rel	igiosa	a Cubana,	Inc.	
ARTICLE II	PRINCIPAL OFFICE		٠					
(Principal street address: 2163 SW Z7 ST		Mailing 5900	address,	if diffe	crent is:	<u>:</u>	
	MIRAMAR FL 33025		HIALEA	H / 1	íL.	33912	- 28 - 28 - 28	
				Ť			P	
ARTICLE II	II PURPOSE					FLOR	12	\$
	or which the corporation is organized is:					1>		
purposes, n	nore specifically to contribute to the de	velopment, coi	nposition, do	cument	tation,	transcription	n, reco	rding
disseminat	ion, and promotion of Cuban religiou	is music. The	corporation	, as pa	art of i	ts charitable	purp	oses
may also r	nake distributions to other organiza	tions that qua	llify as exem	pt org	aniza	tions under	secti	on
501(c)(3)	of the Internal Revenue Code or t	he correspor	nding section	n of ar	ny fut	ure federal	tax c	ode.
			· · · · · · · · · · · · · · · · · · ·					
		r						
ARTICLE II	MANNER OF ELECTION The man		dinastan an al			is via	a maj	ority
	ne Board of Directors.	anner in which in	e directors are el	iected an	а арро	intea:		
ARTICLE	V INITIAL OFFICERS AND/OR DE	RECTORS						
Name and Tit	Antonio Rubi, Director	Name and Title	Marite A	lfons	o, Di	irector		
Address	5900 W 9 Ct	Address:		S.	MIA	MI AVE		
/ (ddi CSS	Hialeah, FL 33012	. Address.	MIAMI	FI.	3	3133	•	
		•		/				
Name and Tit	Fr. Juan Rumin Dominguez, Director	N	Andres 7	Γrujille	o. Di	rector		
	3609 S. Miami Ave.	-				MI AVE		
Address	Miami, FL 33133	_ Address:	MIAMI	FL.		133		
	14114111, 1 2 00 100		101111111					
a de la contra	_{le:} Fr. Juan Sosa, Director	. Name and Title	Bogelio 2	Zelad	a D	irector		
	8670 Byron Ave.		9401 Bi					
Address		Address:				 		
	Miami Beach, FL 33141	•	Miami Sh	iores	, rl	<u> </u>		

Name and Ti	itle: Sister Ondina Cortez, Director	Name and Title:						
Address	3609 S. Miami Ave.	Address:						
	Miami, FL 33133		_					
	·							
Name and Ti	tle:	Name and Title:	ှာ မြူ သံ					
Address		<u> </u>	E E 1 0					
Address		Audress:	28					
		- [71]	28 PM					
			S S					
		# # # # # # # # # # # # # # # # # # #	90:31 					
The name an	/I REGISTERED AGENT d Florida street address (P.O. Box NOT acce	eptable) of the registered agent is:	•					
Name:	Ernesto Miguel Rubi,	•						
Address:	1395 Brickell Avenue, Suite 700							
	Miami, FL 33195							
ARTICLE V	/II INCORPORATOR							
	d address of the Incorporator is:							
Name:	Antonio Rubi							
Address:	5900 W 9 Ct.							
	Hialeah, FL 33012							
Having been certificate, I d	named as registered agent to accept service am familiar with and accept the appointment o	of process for the above stated corporation at the pla as registered agent and agree to act in this capac <mark>i</mark> ty	ice designated in this					
		> 1/24/	2013					
	Required Signature of Registered	l Agent Pal	le .					
I submit this	document and affirm that the facts stated her ment of State constitutes a third degree felony	ein are true. I am aware that any false information sub as provided for in \$ 817.155 F.S.	mitted in a document					
no zopana	بالمال المالية	\	4/2013					
	Required Signature of Incom		ite					

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