

N 13000003453

Florida Department of State
Division of Corporations
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FLORIDA PROFIT/NON PROFIT CORPORATION
JOSE FAJARDO AWARD FOUNDATION INC.

Certificate of Status	0
Certified Copy	1
Page Count	03
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SECRETARY OF STATE
TALLAHASSEE FLORIDA
DIVISION OF CORPORATIONS

13 APR 10 AM 9:50
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ARTICLES OF INCORPORATION
In compliance with Chapter 617, F.S., (Not for Profit)

ARTICLE I NAME

The name of the corporation shall be: JOSE FAJARDO AWARD FOUNDATION INC

ARTICLE II PRINCIPAL OFFICE

Principal street address:

1020 SW. 64 st.
Miami, FL. 33144

Mailing address, if different is:

PO BOX 440476
Miami, FL. 33144-0476

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: THIS IS A NON-PROFIT ORGANIZATION INTENDED TO OPERATE AN ANNUAL AWARDS CEREMONY TO PAY OMAGE TO THOSE WHO QUALIFY FOR SUCH AN AWARD AND TO PROVIDE SCHOLARSHIPS FOR POTENTIAL FUTURE MUSICIANS. AND WE WILL ALSO PROVIDE ASSISTANCE TO OTHER DPO'S AS WE/THE MEMBERS SEE FIT

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

BY THE BY LAWS

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: ORESTE J. Garcia (P)
Address: PO BOX 440476
Miami FL 33144

Name and Title: ARMANDO FAJARDO (VP)
Address: PO BOX 440476
Miami, FL. 33144

Name and Title: CARLOS ELOSUA (D)
Address: PO BOX 440476
Miami, FL. 33144

Name and Title: CRISSEL M. Garcia (D)
Address: PO BOX 440476
Miami, FL 33144

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

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Name and Title: _____ Name and Title: _____
 Address: _____ Address: _____

Name and Title: _____ Name and Title: _____
 Address: _____ Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: ORESTES J. GARCIA
 Address: 1020 SW. 64th
Miami, FL. 33144

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: ORESTE J. GARCIA
 Address: 1020 SW. 64th
Miami, FL. 33144

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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

Orestes J. Garcia
 Required Signature of Registered Agent

4/9/13
 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.

Orestes J. Garcia
 Required Signature of Incorporator

4/9/13
 Date

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