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| (Re                     | questor's Name)  |             |  |  |
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| PICK-UP                 | ☐ WAIT           | MAIL        |  |  |
| (Bu                     | siness Entity Na | me)         |  |  |
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| Special Instructions to | Filing Officer:  | ,           |  |  |
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DIVISION OF BORPORALIER

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## **COVER LETTER**

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

SUBJECT: BISAYAN CONNECTION, INC. - ORLANDO CHAPTER

(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** 

□ \$87.50

Filing Fee & Certified Copy

Filing Fee, Certified Copy

& Certificate

ADDITIONAL COPY REQUIRED

FROM: SUSAN CABUSI

Name (Printed or typed)

1110 WILMINGTON DRIVE

Address

DELTONA, FL 32725

City, State & Zip

407-780-1598

Daytime Telephone number

ggmcsusan@msn.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 | ne corporation shall be: BISAYAN CO                  | NNECTIO            | N, INC ORLANDO CHAF                    | PTER             |
|-----------------|--|--------------------|--|------------------|
| ARTICLE II      | PRINCIPAL OFFICE                                     |                    |  | <del>,</del> 9   |
| 111             | Principal <u>street</u> address:  0 WILMINGTON DRIVE |                    | Mailing address, if different is:      | SECRETIVISION OF |
| DE              | ELTONA, FL 32725                                     |                    |  | ARY OF BORR      |
|                 |  |                    |  | 1 3: 5           |
|                 | or which the corporation is organized is:            |                    |  |                  |
| FOR THE         | BENEFIT OF THE COMMU                                 | NITY AT L          | ARGE; PROMOTE INTERC                   | ULTURAL          |
| DEVELO          | PMENT AND TO ACQUA                                   | NT THE C           | COMMUNITY AT LARGE                     | OF OUR           |
| CUSTO           | MS AND TRADITION; UNI                                | DERTAKE            | PROJECTS, EDUCATION                    | DNA NC           |
| ENTER           | PRISES INTENDED TO IM                                | PROVE T            | HE ECONOMIC, SOCIA                     | L AND            |
| CULTUF          | RAL WELL BEING OF ALL                                | THE MEN            | BERS OF THE ORGAN                      | IZATION.         |
|                 |  |                    |  |                  |
| ARTICLE IV      | MANNER OF ELECTION The ma                            | anner in which the | e directors are elected and appointed: |                  |
| BY MAJO         | RITY VOTES.  |                    |  | -                |
| ARTICLE 1       | V INITIAL OFFICERS AND/OR DE                         | RECTORS            |  |                  |
| Name and Titl   | e: MILAGIN DAVIS - PRES                              | Name and Title     | MANEYA BUREROS - SEC                   |                  |
| Address         | 427 CASA MARINA PLACE                                |                    | 1661 CAMPFIRE LANE                     |                  |
|                 | SANFORD FL 32771                                     | •                  | APT.# 106                              |                  |
|                 |  |                    | ORANGE CITY, FL 32763                  |                  |
| Name and Titl   | SOCORRO SCHMITT- VP                                  | Name and Title     | KAREN ESTREMOS - PRO                   |                  |
| Address         | 730 E JESSUP AVE                                     | Address:           | 1661 CAMPFIRE LANE                     |                  |
| Addiess         | LONGWOOD FL 32750                                    | 7.00.000           | ORANGE CITY, FL 32763                  |                  |
| Nome and The    | e: CHRIS COHEN -TREAS                                | Name and Title     | SUSAN CABUSI - BOD                     |                  |
|                 | 98 ROSEHILL CRESENT COURT                            | Address:           | 1110 WILMINGTON DRIVE                  |                  |
| Address         | DEBARY FL 32713                                      | Address:           | DELTONA, FL 32725                      |                  |
|                 |  |                    |  |                  |

| Name and Title:                       | Name and Title:   | <del></del>       |           |
|---------------------------------------|---|-------------------|-----------|
| Address _                             | Address:  | <del></del>       |           |
| -                                     |   |                   |           |
| Name and Title:                       | Name and Title:   | <del></del>       |           |
| Address _                             | Address:  | <del></del>       |           |
| -                                     |   | <u>ယ</u>          | BIAID     |
| _                                     |   | AY -8             | CHE TAR   |
| ARTICLE VI                            | REGISTERED AGENT  | <br>              | 28.0°     |
| The name and F                        | Clorida street address (P.O. Box NOT acceptable) of the registered agent is:  | ယ္                | OF STATE  |
| Name:                                 | SUSAN CABUSI  | : 56              | 317       |
| Address:                              | 1110 WILMINGTON DRIVE   | <b>o</b> n        | S         |
|                                       | DELTONA FL 32725  |                   |           |
| ARTICLE VII                           | INCORPORATOR  ddress of the Incorporator is:  |                   |           |
| Name:                                 | LEONORA PERRON  |                   |           |
| Address:                              | 4918 PARK STREET  |                   |           |
|                                       | PANAMA CITY, FL 32404   |                   |           |
| Having been na<br>certificate, I am   | med as registered agent to accept service of process for the above stated corporation at the familiar with and accept the appointment as registered agent and agree to act in this capacity | place designated  | l in this |
|                                       | 41  | 24/13             |           |
|                                       | Required Signature of Registered Agent  | Date /            |           |
| I submit this doc<br>to the Departmen | ument and affirm that the facts stated herein are true. I am aware that any false information in of State constitutes a third degree felony as provided for in s.817.155, F.S.              | submitted in a do | cument    |
| Remort                                | -5. Perm 4/6  | 24/2013           | }         |
|                                       | Required Signature of Incorporator  | Date <sup>e</sup> |           |