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(Re	questor's Name)	
(Ad	dress)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	s of Status
Special Instructions to Filing Officer:		
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COVER LETTER

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

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

Filing Fee

\$78.75 \$87.50

& Certified Copy

Filing Fee, Certified Copy

& Certificate

ADDITIONAL COPY REQUIRED

ter, F2 33478 City, State & Zip

5(e1-222-0834 Daytime Telephone number

Navish the Poor @ Gmail. Com E-mail address: (to be used for future annual report notification)

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

The name of the corporation shall be. \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Poor, Irc
ARTICLE II PRINCIPAL OFFICE	· · · · · · · · · · · · · · · · · · ·
Principal <u>street</u> address:	Maning address, if different is.
15146 93rd Lane North	
Jupiter, FL 33478	15 PHISTA
ARTICLE III PURPOSE	TION TO THE TIME
The purpose for which the corporation is organized is: 170 help	· · · · · · · · · · · · · · · · · · ·
reastablish their health, educar	tion, and feed their hunger.
Our goal is to raise funds trivova	gh donations to target large
regions of inderserved popular	ons to bring hope and
regions of inderserved populars happiness With ax services in	ic will all eviate suffering
and help these individuals to	achieve quality of life.
ARTICLE IV MANNER OF ELECTION The manner in which Members will elect divectors by M ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS	a the directors are elected and appointed Committee
Name and Title: Catalina Rodriguez - Chair Name and T	Maria Adalasia Cashlo
Address 15146 9310 Lang Norm Address.	Honorary Board Director
Jupiter, Fl 33478	Calle 15 #2411 Apr 201
	Cartago Valle, Colombia
Name and Title: And Maria Vabuena Name and T	
	Treasurer
8580 Nadmar Ave	los Village or
BOCA ROTON, FL 33434	Jupiter 17 33458
Name and Title: Yarrileth Farriret Name and T	·
Address Event Condinator Abroa Address:	Event Coordinator
Calle 15 # 2-41 Frot 201	770 Millbrae Ct. Unut 1
Cartago Valle, Colombia	West-Palm Beach, FL 33401

Name and Title: Clara Rodriguez	Name and Title:
Address Public Relations	
15146 93rd Jane N	
Jupiter . 71. 33478	
Name and Title:	
Address	
	Address
	· · · · · · · · · · · · · · · · · · ·
·	
A DETICLE III. DECLEMENTO A CRAM	
ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT accept	otable) of the registered agent is:
Name: Catalina Clara P	<u>'okusek</u>
Address: 9350 Bay Plaza	Blvd # 120
Jampa, F2 33619	
ARTICLE VII INCORPORATOR The name and address of the Incorporator is:	
Name: Catalina Rodrigi	E7
Address: 15146.93rd Lane	
Jupiter, FL 3347	<u> </u>
<u> </u>	O
Having been named as registered agent to accept service of certificate, I am familiar with and accept the appointment as	of process for the above stated corporation at the place designated in this registered agent and agree to act in this capacity
Required Signature of Registered A	Agent Date
] I submit this document and affirm that the facts stated herei	n are true. I am aware that any false information submitted in a document
to the Department of State constitutes a third degree felony a	s proviaea for in s.81/.155, F.S.
Required Signature of Incorp	$\frac{5/31/3}{\text{Date}}$
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