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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

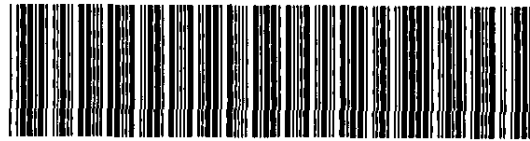
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DIVISION OF CORPORATIONS
13 OCT 30 PM 3:11

COVER LETTER

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

SUBJECT: VALDES CIVIL AND HUMAN RIGHTS FOUNDATION, 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
Status

☐ \$78.75
Filing Fee
& Certified Copy

☐ \$87.50
Filing Fee,
Certified Copy
& Certificate

ADDITIONAL COPY REQUIRED

FROM: VICTOR A. VALDES FUNDATION, INC.
Name (Printed or typed)

4184 23RD PL SW
Address

NAPLES FLORIDA 34116
City, State & Zip

239-417-1844
Daytime Telephone number

LASNACIONESNEWS@AOL.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)

ARTICLE I NAME

The name of the corporation shall be: VALDES CIVIL AND HUMAN RIGHTS FOUNDATION, INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address:
4184 23RD PL SW

NAPLES FLORIDA 34116

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: CIVIL AND HUMAN RIGHT ORGANIZATION

1. Promote and spread the principles of the fundation and increase theirs influence and numerical growth
 2. Promote, work and preserve civils and humans rights of all minorities individuals on florida state.
 3. To exert our united efforts to uphold the rights guarateed to every individual by our state and national laws
- and to stablish cooperative relations with civil and governmental institutuins and agencies in the field of public service.

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

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Victor A. Valdes P
Address: 4184 23rd PL SW
NAPLES FLORIDA 34116

Name and Title: _____

Address: _____

Name and Title: Victor Alexis Valdes VP
Address: 4184 23rd PL SW
NAPLES FLORIDA 34116

Name and Title: _____

Address: _____

Name and Title: Isabel Valdes T
Address: 4184 23rd PL SW
NAPLES FLORIDA 34116

Name and Title: _____

Address: _____

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
13 OCT 30 PM 3:11

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: Victor A. Valdes
Address: 4184 23rd PL SW
NAPLES FLORIDA 34116

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ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Victor A. Valdes
Address: 4184 23rd PL SW
NAPLES FLORIDA 34116

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

Victor A. Valdes

Required Signature of Registered Agent

10/24/2013

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.

Victor A. Valdes

Required Signature of Incorporator

10/24/2013

Date