

N1400002352

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

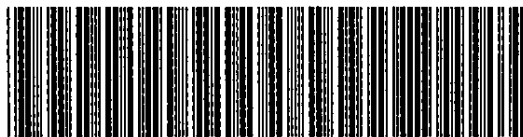
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14 MAR 10 PM 1:39

SECRETARY OF STATE
DIVISION OF CORPORATIONS

3-11-14

COVER LETTER

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

SUBJECT: Hope Wings, Corp.

(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: Jorge Cruz

Name (Printed or typed)

2860 NW 59th Street

Address

Fort Lauderdale, FL 33309

City, State & Zip

954-333-8343

Daytime Telephone number

hopingforwings@hotmail.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: Hope Wings, Corp.

ARTICLE II PRINCIPAL OFFICE

Principal street address:
2860 NW 59th Street

Fort Lauderdale, FL 33309

Mailing address, if different is: _____

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
14 MAR 10 PM 1:39

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: (See attached)

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

The method of selection of the Board of Directors and number of directors shall be stated in the bylaws.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Jorge Cruz, President

Address: 2860 NW 59th Street
Fort Lauderdale, FL 33309

Name and Title: Diego Armando, Treasurer

Address: 2860 NW 59th Street
Fort Lauderdale, FL 33309

Name and Title: Grace Gomez, Secretary

Address: 2860 NW 59th Street
Fort Lauderdale, FL 33309

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Hope Wings, Corp.
Articles of Incorporation Attachment

ARTICLE III PURPOSE

1. Hope Wings, Corp.'s mission is to provide humanitarian relief such as medicine, health services, educational supplies, and food to indigent persons living in Central America and South America.
2. No substantial part of the activities of the corporation shall consist of the carrying on of propaganda or otherwise attempting to influence legislation, and the corporation shall not participate in, or intervene in, any political campaign on behalf of any candidate for public office.
3. The Corporation is organized exclusively for charitable, religious, educational and scientific purposes, including for such purposes, the making of distributions to organizations that qualify as an exempt organization under section 501(c)(3) of the Internal Revenue Code, or the corresponding section of any future federal tax code.

ARTICLE VIII DISSOLUTION

1. The property of this corporation is irrevocably dedicated to charitable purposes and no part of the net income or assets of this corporation shall ever inure to the benefit of any director, officer, or member thereof or to the benefit of any private person.
2. The manner of distribution of assets in this Corporation's winding up is as follows:
Upon dissolution of the Corporation, assets shall be distributed for one or more exempt purposes within the meaning of section 501(c)(3) of the Internal Revenue Code, or the corresponding section of any future federal tax code, or shall be distributed to the federal government, or state or local government for public purpose. Any such asset not so disposed of shall be disposed of by the Court of Competent Jurisdiction of the county in which the principal office of the corporation is then located, exclusively for such purpose or to such organization or organizations as said Court shall determine, which are organized and operated exclusively for such purposes.

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: Incorp Services, Inc.
Address: 17888 67th Court North
Loxahatchee, FL 33470

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: MyUSAcorporation.com
Address: 1 Radisson Plaza, Suite 800
New Rochelle, NY 10801

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

J. F. [Signature] (Attorney-in-fact)
Required Signature of Registered Agent

03/07/2014

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.

J. F. [Signature] of/for MyUSAcorporation.com
Required Signature of Incorporator

03/07/2014

Date

**SPECIAL AND REVOCABLE
LIMITED POWER OF ATTORNEY**

TO ALL PERSON, be it known, that INCORP SERVICES, INC., A Nevada corporation as Grantor, does hereby make and grant a limited and specific power of attorney to Julia Greenberg-Aguilar and appoint and constitute said individual as my attorney-in-fact.

My named attorney-in-fact shall have full power and authority to undertake, commit and perform only the following acts on my behalf to the same extent as if I had done so personally; all with full power of substitution and revocation in the presence:

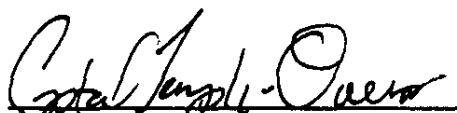
Authority to accept appointment as registered agent on behalf of InCorp Services, Inc. (a Nevada Corporation) for entities which *Selene Enterprises LLC dba MyUSA corporation.com* have purchased agent service on through their account with InCorp Services, Inc.

TERMINATION: Unless sooner revoked or terminated by me, the Special Power of Attorney shall become NULL and VOID from and after December 31, 2014.


Aurora Murtey, Secretary

Dated: December 09, 2013

Signed in my presence this the 10th day of December 2012 by Aurora Murtey, State of Nevada.
County of Clark


Notary Public in the State of Nevada

