

N15000002134

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

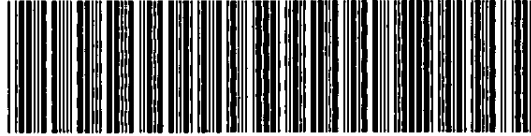
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15 MAR -2 AM 8:35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED

1/4

COVER LETTER

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

SUBJECT: DOMINICAN HERITAGE & CULTURAL FOUNDATION, INC. (FUNHEDO)
(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: JUAN G. ROMERO
Name (Printed or typed)

5659 W. FLAGLER STREET
Address

MIAMI, FLORIDA 33134
City, State & Zip

(786) 443-0162
Daytime Telephone number

kandyvision@yahoo.com
E-mail address: (to be used for future annual report notification)

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 18, 2015

JUAN G. ROMERO
5659 W. FLAGLER STREET
MIAMI, FL 33134

SUBJECT: DOMINICAN HERITAGE & CULTURAL FOUNDATION, INC.
(FUNHEDO)
Ref. Number: W15000012071

We have received your document for DOMINICAN HERITAGE & CULTURAL FOUNDATION, INC. (FUNHEDO) and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Entities may file using only the entity's name. Please delete any reference to the "doing business as name" in your document. If you wish to register your fictitious name, you may do so by filing an application and submitting the appropriate fees to this office.

The registered agent must sign accepting the designation.

Section 607.0120(6)(b), or 617.0120(6)(b), Florida Statutes, requires that articles of incorporation be executed by an incorporator.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Valerie Herring
Regulatory Specialist II
New Filing Section

Letter Number: 415A00003473

ARTICLES OF INCORPORATION

In compliance with Chapter 617, F.S., (Not for Profit)

APPROVED
AND
FILED

ARTICLE I NAME

The name of the corporation shall be: DOMINICAN HERITAGE & CULTURAL FOUNDATION, INC.

15 MAR -2 AM 8:31

ARTICLE II PRINCIPAL OFFICE

Principal street address:

5659 W. FLAGLER STREET

MIAMI, FLORIDA 33134

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: IS TO PROMOTE THE HERITAGE AND CULTURE OF NATIVES
OF THE DOMINICAN REPUBLIC, INCLUDING BUT NOT LIMITED TO ITS MUSIC, CUSTOMS, EDUCATION, FOLKLORE,
DANCE, PAINTING, AND HISTORY, IN SUCH A MANNER THAT THE DESCENDANTS OF A DOMINICAN CAN UNDERSTANDS
WHERE THEIR FAMILY COME FROM, AND FOR COMMUNITIES FROM OTHER COUNTRIES TO LEARN ABOUT THE
DOMINICAN'S HERITAGE. THESE MISSIONS AND OBJECTIVES ARE GOINT TO REACH BY DIFFERENT EVENTS,
SUCH AS FESTIVALS, EXHIBITIONS, CLINICS, DOCUMENTARY, ETC., THAT WILL ENTERTAIN
THE WHOLE IDEA OF THOSE CULTURAL AND HERITAGE ELEMENTS.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected and appointed: ACCORDING TO
THE KNOWLEDGE OF THE DOMINICAN CULTURAL, HERITAGE AND CUSTOMS OF THE SELECTED MEMBERS FOUNDERS

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: JUAN G. ROMERO (PRESIDENT)

Address: 5659 W. FLAGLER STREET
MIAMI, FLORIDA 33134

Name and Title: HECTOR DE PEÑA (V.P)

Address: 5766 DAWSON STREET
HOLLYWOOD, FLORIDA
33023

Name and Title: ROSA E. KASSE (TREASURER)

Address: 5659 W. FLAGLER STREET
MIAMI, FLORIDA 33134

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

APPROVED
AND
FILED

Name and Title: _____ Name and Title: _____

Address _____ Address: 15 MAR -2 AM 8:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

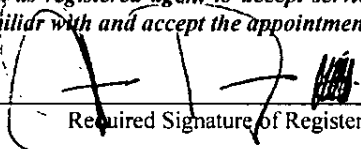
Name: JUAN G. ROMERO
Address: 5659 W. FLAGLER STREET
MIAMI, FLORIDA 33134

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: JUAN G. ROMERO
Address: 5659 W. FLAGLER STREET
MIAMI, FLORIDA 33134

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


Required Signature of Registered Agent

02/09/2015

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.


Required Signature of Incorporator

02/09/2015

Date