

NIS000004738

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

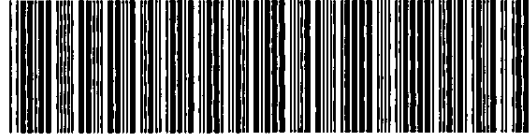
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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15 MAY -6 AM 2:01  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

5-12-15 9

## COVER LETTER

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

**SUBJECT:** Kika Strong, 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:** Kathleen Cardenas

Name (Printed or typed)

13293 NW 11 St

Address

Miami, FL 33182

City, State & Zip

786-546-2133

Daytime Telephone number

info@kikastrong.org

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: Kika Strong, Inc.

**ARTICLE II    PRINCIPAL OFFICE**

Principal street address:  
13293 NW 11 St

Miami, FL 33182

Mailing address, if different is:

**ARTICLE III    PURPOSE**

The purpose for which the corporation is organized is: Kika Strong, Inc is committed to funding research for  
pediatric cancer and providing support for patients and families.

**ARTICLE IV    MANNER OF ELECTION** The manner in which the directors are elected and appointed: As provided for in the bylaws.

**ARTICLE V    INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title:	<u>Kathleen Cardenas, CEO, P</u>	Name and Title:	<u>Ivon Minoso, Treasurer</u>
Address	<u>13293 NW 11 ST</u>	Address:	<u>2986 NW 31st St</u>
	<u>Miami, FL 33182</u>		<u>Miami, FL 33142</u>
<hr/>			
Name and Title:	<u>Alexandra Campos, VP</u>	Name and Title:	
Address	<u>8964 West Flagler St</u>	Address:	
	<u>Miami, FL 33174</u>		
<hr/>			
Name and Title:	<u>David Ajo, Secretary</u>	Name and Title:	
Address	<u>19521 West Saint Andrews Dr</u>	Address:	
	<u>Hialeah, FL 33015</u>		
<hr/>			

15 MAY -6 PM 2:01  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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: KATHLEEN CARDENAS

Address: 13293 NW 11 ST  
MIAMI, FL 33182

**ARTICLE VII INCORPORATOR**

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

Name: KATHLEEN CARDENAS

Address: 13293 NW 11 ST  
MIAMI, FL 33182

*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*

Kathleen Cardenas  
Required Signature of Registered Agent

5/5/2015  
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.*

Kathleen Cardenas  
Required Signature of Incorporator

5/5/2015  
Date



RECEIVED  
15 MAY 11 PM 2:52

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

MAIL ROOM  
TALLAHASSEE, FL

April 29, 2015

KATHLEEN CARDENAS  
13293 NW 11 ST  
MIAMI, FL 33182

SUBJECT: KIKA STRONG, INC.  
Ref. Number: W15000030279

We have received your document for KIKA STRONG, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

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.

Christine Haney  
Regulatory Specialist II  
New Filing Section

Letter Number: 515A00008778