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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JUN 1 0 2015

S. GILBERT

COVER LETTER

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

SUBJECT: Latinos United For a progressive America, 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: Arturo Otero

Name (Printed or typed)

2439 Timothy Lane

Address

Kissimmee, FL 34743

City, State & Zip

4072309051

Daytime Telephone number

lupakissimmee@gmail.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: Latinos United For A Progressive America, INC

FILED

ARTICLE II PRINCIPAL OFFICE

Principal street address:

2439 Timothy Lane

Kissimmee, FL 34743

15 JUN -5 PM 4:50
MAILING ADDRESS, IF DIFFERENT IS:
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Latinos United For A Progressive America was created in order to significantly improve the quality of life of Latino families and future of Latino children. Our Vision & Vission is to create a world of opportunity In Education, Economics, Jobs and Veteran support. Where Latinos can live dignified lives, full of opportunity and free of poverty, persecution and racism.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected and appointed: Only Appointed by Director

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Arturo Otero/Director Name and Title: _____

Address: 2439 Timothy Lane Address: _____
Kissimmee, FL 34743

Name and Title: Hector Rodriguez/Officer Name and Title: _____

Address: 2806 Harwood Court Address: _____
Kissimmee, FL 34744

Name and Title: Jose Balsquides/Officer Name and Title: _____

Address: 3231 Herons Point Cir. Address: _____
Kissimmee, FL 34741

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: Arturo Otero

Address: 2439 Timothy Lane
Kissimmee, Fl 34743

ARTICLE VII INCORPORATOR

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

Name: Arturo Otero

Address: 2439 Timothy Lane
Kissimmee, Fl 34743

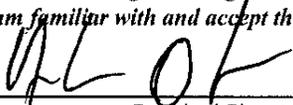
ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

5-29-15

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

5-29-15

Date