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Florida Department of State
Division of Corporations
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**FLORIDA PROFIT/NON PROFIT CORPORATION
OUR COMMUNITY SUPPORT SERVICES INC**

Certificate of Status	0
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P. 002/003

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

ARTICLE I NAME

The name of the corporation shall be: OUR COMMUNITY SUPPORT SERVICES INC

ARTICLE II PRINCIPAL OFFICE

Principal street address:

Mailing address, if different is:

5740 SW 59 PL

MIAMI, FL 33143

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: SUPPORTING THE INDIVIDUAL, THE FAMILY AND THE
COMMUNITY WITH HEALTH, EDUCATION, AND LEGAL ASSISTANTS TO IMPROVE THEIR QUALITY OF LIFE.

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

By minutes & By laws.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: MAGALY SOSA (P)

Address: 5740 SW 59 PL
MIAMI, FL 33143

Name and Title: HERIBERTO CAZANAS (T)

Address: 5740 SW 59 PL
MIAMI, FL 33143

Name and Title: OSCAR CHRISTIAN AGUILAR (VP)

Address: 5740 SW 59 PL
MIAMI, FL 33143

Name and Title: _____

Address: _____

Name and Title: SAUL RON BRENESKY (S)

Address: 5740 SW 59 PL
MIAMI, FL 33143

Name and Title: _____

Address: _____

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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: OSCAR CHRISTIAN AGUILAR

Address: 5740 SW 59 PL
MIAMI, FL 33143

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: OSCAR CHRISTIAN AGUILAR

Address: 5740 SW 59 PL
MIAMI, FL 33143

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

①

Required Signature of Registered Agent

03/09/2016

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.

②

Required Signature of Incorporator

03/19/2016

Date