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Florida Department of State  
Division of Corporations  
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## FLORIDA PROFIT/NON PROFIT CORPORATION RDP MINISTERIO INC.

Certificate of Status	0
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**ARTICLES OF INCORPORATION**  
In compliance with Chapter 617, F.S., (Not for Profit)H160004135333  
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**ARTICLE I NAME**

The name of the corporation shall be:

RDP Ministerio IncSECRETARY OF STATE  
TALLAHASSEE FLORIDA**ARTICLE II PRINCIPAL OFFICE**Principal street address:

Mailing address, if different is:

346 NW 57 AVE, Suite J-11 same as Principal  
Miami, FL. 33126**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Christian Missions Organization.**ARTICLE IV MANNER OF ELECTION**The manner in which the directors are elected and appointed: By the Bylaws**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: Gisela Soriano / President

Address:

346 NW 57 AVE, Suite J-11  
Miami, FL. 33126

Name and Title:

Ismael Soriano / Vice President

Address:

346 N.W. 57 AVE, Suite J-11  
Miami, FL. 33126Name and Title: Yismel Soriano / Secretary

Address:

346 NW 57 AVE, Suite J-11  
Miami, FL. 33126

Name and Title:

Name and Title:

Name and Title:

Address:

Address:

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Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address \_\_\_\_\_ Address: \_\_\_\_\_

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: \_\_\_\_\_

Yismel Soriano

Address: \_\_\_\_\_

346 NW 57 AVE, Suite J-11Miami, FL 33126**ARTICLE VII INCORPORATOR**The name and address of the Incorporator is:

Name: \_\_\_\_\_

Ismael Soriano

Address: \_\_\_\_\_

346 NW 57 AVE, Suite J-11Miami, FL 33126

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

6/2/16  
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

6/2/16  
Date

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