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(Requestor's Name)				
(Address)				
(Address)				
(Cit	ty/State/Zip/Phone) #)		
PICK-UP	WAIT	MAIL		
(Business Entity Name)				
(Do	ocument Number)			
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer:				
		-		

Office Use Only



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07/22/16--01019--024 **78.75





COVER LETTER

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

SUBJECT:	Latino Heroes, Inc.
	(PROPOSED CORPORATE NAME – <u>MUST INCLUDE SUFFIX</u>)

Enclosed is an original and one (1) copy of the Articles of Incorporation and a check for :

\$70.00 \$78.75

Filing Fee Filing Fee & Certificate of Status

\$\\$78.75 \quad \\$87.50 \quad \\$87.50 \quad \\$Filing Fee, \quad \\$Certified Copy \quad \\$ Certificate

ADDITIONAL COPY REQUIRED

FROM:	Carlos Huertas Name (Printed or typed)		
	7950 NW 53rd Street, Suite 337		
	Address		
	Miami, FL 33166		
	City, State & Zip		
	305-381-1947		
	Daytime Telephone number		

carloshuertasus@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 INCORPORATIONIn compliance with Chapter 617, F.S., (Not for Profit)

The name of t	he corporation shall be: Latino Heroes	s, Inc.		
ARTICLE I			Mailing address, if different is:	
Mi	ami, FL 33166			
	TO PURPOSE For which the corporation is organized is: Outleton of the community are			at have
ARTICLE I	V MANNER OF ELECTION The ma	anner in which the	directors are elected and appointed: As	1,22
ARTICLE		RECTORS	COLUMN TO THE PARTY OF THE PART	22 #
Name and Tit	_{le:} Carlos Huertas- President	Name and Title	Yanira Reina Perez- Director	
Address	7950 NW 53rd Street, Suite 337	Address:	7950 NW 53rd Street, Suite 337	5
	Miami, FL 33166		Miami, FL 33166	
Name and Tit	Patrick Leconte- Director	Name and Title	Peter Stember- Director	
Address	7950 NW 53rd Street, Suite 337	Address:	7700 Collegue Town Dr. # 210	
	Miami, FL 33166		Sacramento, CA 95826	
Name and Tit	le:	Name and Title		
Address		Address:		
	eren eren eren eren eren eren eren eren			

Name and Title		d Title:	
Address	Address:		
Name and Title:	Name an	d Title:	
Address	Address:		
-			
ARTICLE VI	REGISTERED AGENT Iorida street address (P.O. Box NOT acceptable) of t	he registered agent is:	Top 5
Name:	Carlos Huertas		
Address:	7950 NW 53rd Street, Suite 337		**** 22 ****
	Miami, FL 33166		M 7:40
ARTICLE VII	INCORPORATOR ddress of the Incorporator is:		ŞF O
Name:	Carlos Huertas		
Address:	7950 NW 53rd Street, Suite 337	•	
	Miami, FL 33166		
Having been na certificate, I am	med as registered agent to accept service of process familiar with and accept the appointment as registere	for the above stated corporation a d agent and agree to act in this cap	nt the place designated in this acity
	Con Confusion Co		14 11 th 2016 Date
I submit this doc to the Departme	rument and affirm that the facts stated herein are true nt of State constitutes a third degree felony as provide	e. I am aware that any false informa d for in s.817.155, F.S.	ution submitted in a documen
	Required Signature of Incorporator	<u> </u>	Date 2016.