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Division of Corporations

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FLORIDA PROFIT/NON PROFIT CORPORATION AGOS FOUNDATION INC

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T. SCOTT



09/30/2016 13:43 3052201440

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

H16000244068

| ADTICITY NAME A | |
|---|----------|
| The name of the corporation shall be: AGOS Foundation INC | |
| ARTICLE II PRINCIPAL OFFICE | |
| Principal street address: 1766 thetrord circle Orlando fl. 32824 | |
| ARTICLE III PURPOSE The purpose for which the corporation is organized is: to Help out kids Reach a star of Happiness. Hips will be a chireved through different programs such as; donating into education nutrition medicines and Gifts. | te 3000, |
| ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected and appointed: The DIGUS ARTICLE V INITIAL OFFICERS AND OR DIRECTORS Name and Title: Casiani Danny Converas; Name and Title: Address Same as Address: Principal Name and Title: Marcial Bellerarty Name and Title: Address Same as Address: Principal Name and Title: Darry Marayle? Name and Title: Address Same as Address: | |

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| | | | • | | |
|--|--|----------------------------------|-------------|--|--|
| Name and Title: | | Vame and Title: | | | |
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| Address | | iddress: | | | |
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| | | | | | |
| | | | | | |
| The name and Flo | REGISTERED AGENT Orlida street address (P.O. Box NOT acceptal | ble) of the registered agent is: | | | |
| Name: | Casiani Danny | - " | | | |
| Address: | Molo that ford circle | | | | |
| | orlando FL 32824 | | | | |
| | | | | | |
| | INCORPORATOR dress of the Incorporator is: | | • | | |
| Name: | <u>Casiani</u> <u>Danny</u> <u>Contreras</u> | | | | |
| Address: | 1766 that food circle | | | | |
| | Orlando fl 3 | 2824 | | | |
| ARTICLE VIII | EFFECTIVE DATE: | | | | |
| Effective date, if other than the date of filling: (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 filling.) | | | | | |
| 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 9-30-10 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. | | | | | |
| | Channel | | 9-30-16 | | |
| | Required Signature of Incorpor | rator | Date | | |