

N17000003501

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17 APR -3 AM 8:35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

N17-024635

04/04/17



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED

17 APR -3 AM 10:08

March 22, 2017

VIRGINIA BROWN
6827 MAGNOLIA POINTE CIR.
ORLANDO, FL 32810

SUBJECT: WARM WELCOMING ARMS
Ref. Number: W17000024635

We have received your document for WARM WELCOMING ARMS and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name must contain a word that will clearly indicate that it is a corporation. This word may be: CORPORATION, CORP., INCORPORATED, or INC. Sections 617.0401(1)(a) and 617.1506(1), Florida Statutes, prohibits the use of the word COMPANY or CO. in the name of a non-profit corporation.

Section 607.0120(6)(b), or 617.0120(6)(b), Florida Statutes, requires that articles of incorporation be executed by an incorporator.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Thomas Chang
Regulatory Specialist II
New Filing Section

Letter Number: 617A00005505

Bylaws are not filed with this office. Please retain them for your records.

COVER LETTER

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

SUBJECT: WARM WELCOMING ARMS CORP
(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: VIRGINIA BROWN
Name (Printed or typed)

6827 MAGNOLIA POINTE CIRCLE
Address

Orlando, Florida 32810
City, State & Zip

407-617-6597
Daytime Telephone number

warmwelcomingarms@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)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be: WARM WELCOMING ARMS CORP

ARTICLE II PRINCIPAL OFFICE

Principal street address:
6827 MAGNOLIA POINTE CIR

Orlando, Florida 32810

Mailing address, if different

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: The Corporation is form strictly as a non-profit, by making this statment there

will be no gain or profit direct or indirect to it self or to its directors or officers, and shall be operated exclusively for charitable,

religious, educational, and scientific purposes, as those terms are defined in Section 501(c)(3) of the Internal Revenue code of 1986,

or any successor thereto, as amended from time to time. More particularly, the purposes of the Corporation are:

Life Coaching, Targeted Case Management, Career Consultation, ESOL classes(conversational English), Support Group,

Clothing and small household items and Interpreter Services.

Our Mission is to inspire, empower, and install hope to Hispanics who have recently move to the United States.

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

The number and manner of ellection or appointer of directors and their terms of offices
shall be as provided in the by laws, but the number of directors shall not be less than five.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: VIRGINIA BROWN (CEO/Director)

Address: 6827 MAGNOLIA POINTE CIR
Orlando, Florida 32810

Name and Title: ROBERTO QUERECUTO

Address: BOARD MEMBER
2063 SHANNON LAKES BLVD
KISSIMMEE, FL 34743

Name and Title: FABIOLA GOMEZ (BOARD MEMBER)

Address: 7634 PINE NEST CT
ORLANDO, FL 32822

Name and Title: NATASHA DIAL (VICE CHAIR)

Address: 8816 VALENCIA OAKS CT
ORLANDO, FL 32825

Name and Title: ELIZABETH HERNANDEZ

Address: BOARD MEMBER
14826 FABERGE DR
ORLANDO, FL 32828

Name and Title: AIDA VEGA (SECRETARY)

Address: 2739 KEYSTONE DR
ORLANDO, FL 32806

Name and Title: LUZ HIGUERA (CHAIR) Name and Title: _____
Address: 7305 HOLLOW RIDGE CIRCLE Address: _____
ORLANDO, FL 32822 _____

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: VIRGINIA BROWN
Address: 6827 Magnolia Pointe CIR
Orlando, Florida 32810

ARTICLE VII INCORPORATOR

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

Name: VIRGINIA BROWN
Address: 6827 Magnolia Pointe CIR
Orlando, Florida 32810

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

17 APR -3 AM 8:35

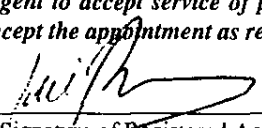
ARTICLE VIII EFFECTIVE DATE:

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 days prior or 90 days after the filing.)

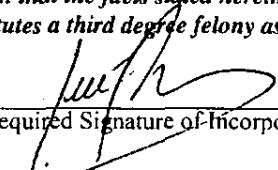
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

03/29/2017
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

03/29/2017
Date