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To:  
Division of Corporations  
Fax Number : (850)617-6381

From:  
Account Name : CLARA GIRALDO, P.A.  
Account Number : I1999000017  
Phone : (305)485-9300  
Fax Number : (305)485-1098

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

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FLORIDA PROFIT/NON PROFIT CORPORATION  
CARITAS DESERT, INC.

Certificate of Status	0
Certified Copy	1
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NOV 17 2017

**ARTICLES OF INCORPORATION  
FOR  
CARITAS DESERT, INC.**

The undersigned, acting as incorporator(s) of a corporation pursuant to chapter 617, Florida Statutes, adopt(s) the following Articles of Incorporation:

**ARTICLE I NAME**

The name of the corporation shall be: CARITAS DESERT, INC.

**ARTICLE II PRINCIPAL PLACE OF BUSINESS AND MAILING ADDRESS**

The principal place of business and the mailing address of this corporation shall be:

17272 SW 139 CT  
MIAMI, FL 33177

178816 01 01

**ARTICLE III PURPOSE(S)**

The specific purpose(s) for which the corporation is organized is (are):  
National and International Charities help to the needy.

**ARTICLE IV MANNER OF ELECTION OF DIRECTORS**

The manner in which the directors are elected or appointed is as follows:  
Shall be started in the minutes and by laws.

CLARA GIRALDO P.A.  
4080 SW 84 AVENUE SUITE C  
MIAMI, FL 33155  
PH.: (305) 485-9300

**ARTICLE V LIMITATION OF CORPORATE POWERS**

The corporate powers of this corporation are as provided in section 917.0302, Florida Statutes, unless limited as follows:

**ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS**

The name and the street address of the initial registered agent is:

**RAMON GALLEGO**

**17272 SW 139 CT**

**MIAMI, FL 33177**

**ARTICLE VII INCORPORATORS**

The name(s) and street address(es) of the incorporator(s) for these Articles of Incorporation is (are):

**RAMON GALLEGO**

**PRESIDENT**

**17272 SW 139 CT**

**MIAMI, FL 33177**

**GINA ALEXANDRA CARDENAS**

**VICEPRESIDENT**

**17272 SW 139 CT**

**MIAMI, FL 33177**

The undersigned incorporator(s) has (have) executed these Articles of Incorporation this 16 day of November 2017

**CLARA GIRALDO P.A.  
4080 SW 84 AVENUE SUITE C  
MIAMI, FL 33155  
PH.: (305) 485-9300**

Signature(s) of the Incorporator(s)

*Ramon Gallego*

*Ramon Gallego*

Typed name of incorporator signing

Signature(s) of the Incorporator(s)

*Gina A. Cardeas*

Gina A Cardeas

Typed name of incorporator signing

**CERTIFICATE OF DESIGNATION**

**REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provisions of sections 607.0501 or 617.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

The name of the corporation is :

CARITAS DESERT, INC.

1. The name and address of the registered agent and office is:

RAMON GALLEGO

(NAME)

17272 SW 139 CT

(P.O. BOX NOT ACCEPTABLE)

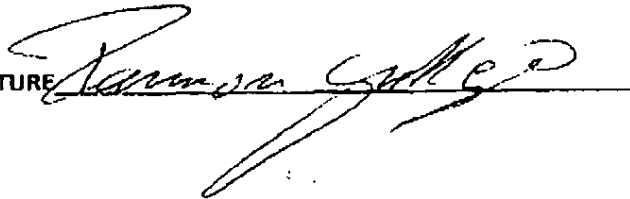
MIAMI, FL 33177

CLARA GIRALDO P.A.  
4080 SW 84 AVENUE SUITE 2  
MIAMI, FL 33155  
PH.: (305) 485-9300

(CITY/STATE/ZIP)

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE ABLIGATIONS OF MY POSITION AS REGISTERED AGENT.

SIGNATURE



DATE

11-16-17

CLARA GIRALDO P.A.  
4080 SW 84 AVENUE SUITE C  
MIAMI, FL 33155  
PH.: (305) 485-9300