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SECALIMACE STATE

OCT 2.6 2018

K. Brumbley

COVER LETTER

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

SUBJECT:	LIDERES AL A	,				
	(PROPOSED CORPOR	RATE NAME – <u>MUST IN</u>	CLUDE SUFFIX)			
REF.# : W18	000075 874					
LETTER #: 5	18A00017341					
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: _	P.O. Box	(Printed or typed) 763 Address	-			
BRADENTON, FL 34206 City, State & Zip						

e. delgado. 2011@ gmail. Com E-mail address: (to be used for future annual report notification)

NOTE: Please provide the original and one copy of the articles.

941 - 815 - 8495
Daytime Telephone number

	FICLES OF INC			ZBIB C SEC.	
ARTICLE I NAME	Librara	A.)	ma INC	OCT 2	11
The name of the corporation shall be:	LIVERES	AL MUN	IDO, INC.	<u>. ११३ %</u> ह्याच	— !
ARTICLE II PRINCIPAL OFFICE					
Principal street address:			ling address, if dif		Same of
308 SOTH AVE TER	-	<u> </u>	. 0 . Box 7	763 = N	
	4203	В	RADENTON	1, FL 3420	<u> </u>
5505 ISTH ST E BPADENTON, PL 342	93				
ARTICLE III PURPOSE The purpose for which the corporation is organiz	ed is: TO PRO	MOTE THE	TEACHIN	G AND DISE	=MINA-
TION OF FAMILY VALUES					
ALL MEMBERS OF OUR CO.	UNUNITY S	DECIALLY	CHILDRE	N AND YOU	ING
ADUCTS, AND, TO IDENTI		· ·			
TO CARRY OUT OUR MISSI					-
10 67/77 001 001 71102					
ARTICLE IV MANNER OF ELECTION TO Elected annually to Serve OUT Organization's bylaws ARTICLE V INITIAL OFFICERS AND/OR	for a period. DIRECTORS	l of one y	pear and i	in accorda	ance with
Address P.O. Box 763					
BRADENTON, FL 3				FL 3420	ØS
Name and Title: VICE - PRESIDENT:	IDEL DIAZiame an	d Title: DIRE	CTOR: NE	ELSON MOJIC	CA.
Address 3604 27TH ST E	Address:	350	05 9TH "	ST W	
BRADENTON, FL 34	_	LOT			
'				-L 34205	
SECRETARY: Name and Title: DANIEL (ASTELLA	NO Name an	d Title:			
Address 7516 24TH AVE					
BRADENTON, FL 3					
WILL NION, FL	/ (20-1				

Name and Title:_	Name and Title:
Address	Address:
 -	
-	
Name and Title:	Name and Title:
Address	Address:
_	
_	
	REGISTERED AGENT orida street address (P.O. Box NOT acceptable) of the registered agent is:
Name:	EDMUNDO A DELGADO
Address:	308 SOTH AVE TER E
	BRADENTON, FL 34203
ABTICLEVI	INCORDOR (TOP
	INCORPORATOR dress of the Incorporator is:
Name:	EDMUNDO A DELGADO
Address:	308 SOTH AVE TER E
	BRADENTON, FL 34203
ARTICLE VIII	EFFECTIVE DATE:
Effective date, if of	other than the date of filing: (OPTIONAL) ate is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)
(II all CIICCIII di	the is used, the date mast of specific and cannot be more than five days prior or 20 days after the image,
	inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the ive date on the Department of State's records.
	ned as registered agent to accept service of process for the above stated corporation at the place designated in this undiar with and accept the appointment as registered agent and agree to act in this capacity
	Required Signature of Registered Agent Date
	ment and affirm that the facts stated herein are true. I am aware that any false information submitted in a document t of State constitutes a third degree felony as provided for in s.817.155, F.S.
,	
	Required Signature of Incorporator 10 17 18 Date

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