

3/25/2019

Division of Corporations

N19000003132

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To:

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

From:

Account Name : BUSINESS WORLD TRANSACTIONS, INC.
Account Number : 104512000707
Phone : (305)803-2736
Fax Number : (305)646-1527

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

Email Address: _____

FLORIDA PROFIT/NON PROFIT CORPORATION
FRIA FOR VET, CORP.

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$70.00

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

ARTICLE I NAMEThe name of the corporation shall be: FRIA FOR VET, INC.**ARTICLE II PRINCIPAL OFFICE**Principal street address:2548 SW 147 PATHMIAMI, FL. 33185

Mailing address, if different is:

2548 SW 147 PATHMIAMI, FL. 33185**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: THIS CORPORATION SHALL BE ORGANIZED FOR THE PURPOSE
OF PROVIDING SHELTER AND FOOD FOR HOMLESS VETERANS, FUNDS SHALL BE COLLECTED BY DONATIONS.

ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected and appointed: By the
majority of the directors at an annual meeting.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:	<u>LEONARDO VALENTIN (DP)</u>	Name and Title:	_____
Address	<u>2548 SW 147 PATH</u>	Address:	_____
	<u>MIAMI, FL. 33185</u>		_____
	_____		_____
Name and Title:	<u>YADIRA VALENTIN (DVP)</u>	Name and Title:	_____
Address	<u>2548 SW 147 PATH</u>	Address:	_____
	<u>MIAMI, FL. 33185</u>		_____
	_____		_____
Name and Title:	<u>JORGE OCHOTORENA (DST)</u>	Name and Title:	_____
Address	<u>2548 SW 147 PATH</u>	Address:	_____
	<u>MIAMI, FL. 33185</u>		_____
	_____		_____

Name and Title: _____	Name and Title: _____
Address _____	Address: _____
_____	_____
_____	_____
Name and Title: _____	Name and Title: _____
Address _____	Address: _____
_____	_____
_____	_____

ARTICLE VI REGISTERED AGENTThe name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: LEONARDO VALENTIN
Address: 2548 SW 147 PATH
MIAMI, FL. 33185

ARTICLE VII INCORPORATORThe name and address of the Incorporator is:

Name: LEONARDO VALENTIN
Address: 2548 SW 147 PATH
MIAMI, FL 33185

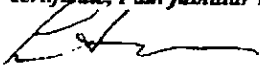
ARTICLE VIII EFFECTIVE DATE:

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

3/16/2019

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

3/16/2019

Date