

N19000003975

Florida Department of
Division of Corporations
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To:

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

From:

Account Name : VDT CORPORATE SERVICES
Account Number : I20180000047
Phone : (305)878-1516
Fax Number : (786)542-5995

****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 OUR KIDS, OUR FUTURE CORP

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

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19 APR 15 PM 4: 07
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TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: OUR KIDS, OUR FUTURE 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: JOAO PEDRO VOLZ

Name (Printed or typed)

150 SE 2ND AVE SUITE 905

Address

Miami, FL 33131

City, State & Zip

305-503-9867

Daytime Telephone number

MANAGEMENT@SAINTJOSEPHGROUP.COM
E-mail address: (to be used for future annual report notification)

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

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ARTICLES OF INCORPORATION

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

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ARTICLE I NAMEOUR KIDS, OUR FUTURE CORP
The name of the corporation shall be: _____**ARTICLE II PRINCIPAL OFFICE**Principal street address.
150 SE 2ND AVE SUITE 908, MIAMI FL 33131

_____Mailing address, if different is:

_____**ARTICLE III PURPOSE**OUR KIDS, OUR FUTURE is a non-profit corporation and shall
The purpose for which the corporation is organized is: _____

be operated exclusively for educational and charitable purposes within the meaning of Section 501 (c)(3)

of the Internal Revenue Code of 1986, or the corresponding section of any future Federal tax code.

OUR KIDS, OUR FUTURE will operate as a nonprofit organization that will raise funds and organize various

educational workshops, with a focus on arts and sports, in order to help youth in the U.S.. Will organize

extracurricular activities for children and teenagers that will not collide with their regular school activities and

commitments, to occupy their time after classes, so they will not succumb to nihilism, addictions, and crime.

ARTICLE IV MANNER OF ELECTIONThe manner in which the directors are elected and appointed: in the Bylaws.

_____**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: Debora Cristina Braga Jesus Barros/ PAddress: 150 SE 2ND AVE SUITE 908
MIAMI, FL 33131 USA

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

_____CLERK OF STATE
AT
TALLAHASSEE, FLORIDA

19 APR 15 PM 4: 09

FILED

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Name and Title: _____ Name and Title: _____ (((H19000120808 3)))

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: VDT Corporate Services LLC
Address: 150 SE 2ND AVE SUITE 905
MIAMI, FL 33131

ARTICLE VII INCORPORATORThe name and address of the Incorporator is:

Name: JOAO PEDRO VOLZ
Address: 150 SE 2ND AVE SUITE 905
MIAMI, FL 33131

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 Agent04/11/2019_____
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 Incorporator04/11/2019_____
Date

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