

N 20000005311684

Florida Department of State
Division of Corporations
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Division of Corporations
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**FLORIDA PROFIT/NON PROFIT CORPORATION
OKAN LAYE INC.**

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

M SIMMONS

FEB 17 2020

RECEIVED
2020 FEB 17 PM 12:20

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

ARTICLE I NAMEThe name of the corporation shall be: Okan Laye Inc.**ARTICLE II PRINCIPAL OFFICE**Principal street address:15622 SW 100 terrMiami, FL 33196

Mailing address, if different is:

15622 SW 100 TERR.MIAMI, FL 33196**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: The general purpose of this Corporation shall be to preserve the yoruba culture in Cuba another Countries and for all other lawful purposes which this corporation and undertake and maintain its status. Under the internal revenue Code Section 501(c)(3)

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected and appointed:

By the By Laws**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: Joe Maikel Lopez Lago Name and Title: PresidentAddress: 15622 SW 100 terr Address: _____
Miami, FL 33196Name and Title: Cindy Amalia Lopez Name and Title: Vice PresidentAddress: 15622 SW 100 terr Address: _____
Miami, FL 33196Name and Title: Daniel Ferrero Name and Title: TreasurerAddress: 15622 SW 100 terr Address: _____
Miami, FL 33196

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

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: Cindy Amalia Lopez
Address: 15622 SW 100 terr
Miami, FL 33196

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Cindy Amalia Lopez
Address: 15622 SW 100 terr
Miami, FL 33196

2020 FEB 17 AM 12:12

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

Cindy A. Lopez

Required Signature of Registered Agent

2/17/2020
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.

Cindy A. Lopez

Required Signature of Incorporator

2/17/2020
Date