

1120000004438

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

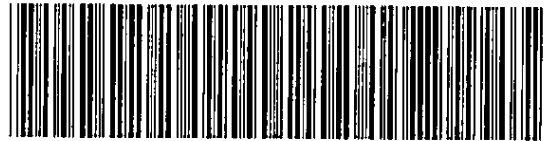
Special Instructions to Filing Officer:

Office Use Only

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T. SCOTT



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2021 APR 21 AM 5:49
Filing Office
T. SCOTT



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 13, 2020

JILENNY PORRAS
700 NE 63RD ST D609
MIAMI, FL 33138

SUBJECT: INCREDIBLE KIDS FOUNDATION, INC
Ref. Number: W20000016544

We have received your document for INCREDIBLE KIDS FOUNDATION, INC and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The title(s) in the officer/director field(s) is/are not acceptable. Please refer to the following link for acceptable officer/director title information.
<http://dos.myflorida.com/sunbiz/search/guides/corporation-records/title-abbreviations/>

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Tyrone Scott
Regulatory Specialist II
New Filings Section

Letter Number: 020A00005553

2020 APR 21 PM 4:32
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: Incredible Kids Foundation, Inc

(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: Jilenny Porras

Name (Printed or typed)

700 NE 63rd ST D609

Address

Miami, FL 33138

City, State & Zip

305-986-8966

Daytime Telephone number

Incrediblekidsfoundation@gmail.com

E-mail address: (to be used for future annual report notification)

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

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

ARTICLE I NAME

The name of the corporation shall be: Incredible Kids Foundation, Inc

ARTICLE II PRINCIPAL OFFICE

Principal street address:
700 NE 63rd St D609

Miami FL, 33138

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Our program is of inclusion for immigrant children with or without disabilities with extraordinary and incredible skills in the field of acting, writing, designing and much more. Incredible Kids Foundation, Inc help develop communication skills, improve short-term memory, and gain confidence which will allow them to participate in different tas so that they can express themselves in a safe environment. We will help them create content for digital platforms where they can showcase their talents and in that way deliver them to their new city.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected and appointed: Shall be elected in accordance with methods and qualifications specified in the bylaws.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Rosa M Lopez/ President

Address: 16155 SW 86 Terrace
Miami, FL 33193

Name and Title: _____

Address: _____

Name and Title: Vicente Albarracin/ Secretary

Address: 151 SE 1st St #2010
Miami, FL 33131

Name and Title: _____

Address: _____

Name and Title: Jilenny Porras/ Treasurer

Address: 700 NE 63rd St D609
Miami, FL 33138

Name and Title: _____

Address: _____

APR 21 AM 9:48

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: Jilenny Porras

Address: 700 NE 63rd St D609

Miami, FL 33138

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: Jilenny Porras

Address: 700 NE 63rd St D609

Miami, FL 33138

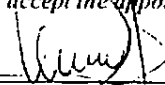
ARTICLE VIII EFFECTIVE DATE:

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

01/21/2020
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.


Required Signature of Incorporator

01/21/2020
Date