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**FLORIDA PROFIT/NON PROFIT CORPORATION
ASAMBLEA DE LA RECONCILIACION CUBANA INCORPORATED.**

Certificate of Status	0
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STATE
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION

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

ARTICLE I NAMEThe name of the corporation shall be: ASAMBLEA DE LA RECONCILIACION CUBANA INCORPORATED.**ARTICLE II PRINCIPAL OFFICE**Principal street address:18401 SW 200TH STMIAMI, FL 33187

Mailing address, if different is:

18401 SW 200TH STMIAMI, FL 33187**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: 1. THE CORPORATION IS ORGANIZED EXCLUSIVELY FOR CHARITABLE, EDUCATIONAL PURPOSES, INCLUDING FOR SUCH PURPOSES, THE MAKING OF DISTRIBUTIONS TO ORGANIZATIONS THAT QUALIFY AS EXEMPT ORGANIZATIONS UNDER SECTION § 501(c)(3) OF THE INTERNAL REVENUE CODE, OR THE CORRESPONDING SECTION OF ANY FUTURE FEDERAL TAX CODE

2.- TO EDUCATE AND PROMOTE AWARENESS ON CIVIC AND DEMOCRACY AND CIVIL RIGHTS IN CUBA

3. SAID CORPORATION SHALL FURTHER HAVE POWERS TO HAVE PERPECTUAL SUCESSION

BY IT'S CORPORATE NAME "ASAMBLEA DE LA RECONCILIACION CUBANA INCORPORATED."

ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected and appointed: BY VOTE**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: DIEGO M. TINTORERO-PRESIDENTAddress: 18401 SW 200TH STMIAMI, FL 33187

Name and Title: _____

Address: _____

Name and Title: JUAN PEREZ - V/TREASURERAddress: 18401 SW 200TH STMIAMI, FL 33187

Name and Title: _____

Address: _____

Name and Title: MAYADANLY GARCIA-SECRETARYAddress: 18401 SW 200TH STMIAMI, FL 33187

Name and Title: _____

Address: _____

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STATE OF FLORIDA

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: DIEGO M TINTORERO
Address: 18401 SW 200TH ST
MIAMI, FL 33187

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: DIEGO M TINTORERO
Address: 18401 SW 200TH ST
MIAMI, FL 33187

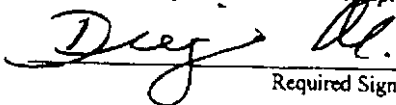
ARTICLE VIII EFFECTIVE DATE:

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

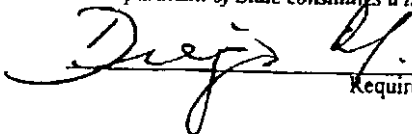


Required Signature of Registered Agent

10/02/2020

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

10/02/2020

Date