



**ARTICLES OF INCORPORATION**

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

**ARTICLE I NAME**The name of the corporation shall be: Unity para el desarrollo Integral, Inc.**ARTICLE II PRINCIPAL OFFICE**Principal street address:

Mailing address, if different is:

104 SW 9<sup>th</sup> StreetApt 807Miami, FL 33130**ARTICLE III PURPOSE**The purpose for which the corporation is organized is: To offer classes, lectures,  
workshops and seminars that promote the  
inner development.**ARTICLE IV MANNER OF ELECTION** The manner in which the directors are elected and appointed: by the  
bylaws.**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: REV. Angel M. Mateo, Name and Title: \_\_\_\_\_  
DIRECTOR.Address: 104 SW 9<sup>th</sup> ST Address: \_\_\_\_\_  
Apt 807, Miami, FL 33130

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_ Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_ Address: \_\_\_\_\_

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Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address \_\_\_\_\_ Address: \_\_\_\_\_

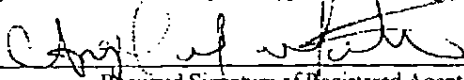
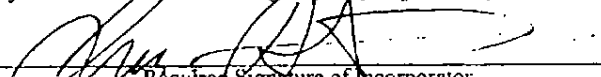
Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address \_\_\_\_\_ Address: \_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**The **name and Florida street address** (P.O. Box NOT acceptable) of the registered agent is:Name: Angel M. MateoAddress: 104 SW 9 Street  
Apt 807, Miami, FL 33130**ARTICLE VII INCORPORATOR**The **name and address** of the Incorporator is:Name: Luis A. FloresAddress: 8372 NW 142nd ST  
Miami Lakes FL 33016**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 Agent11/30/20  
\_\_\_\_\_  
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 Incorporator11/30/2020  
\_\_\_\_\_  
Date