

1/5/2021

Division of Corporations

721000004935

Florida Department of State
Division of Corporations
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To:
Division of Corporations
Fax Number : (850)617-6381

From:
Account Name : BUSINESS WORLD TRANSACTIONS, INC.
Account Number : 104512000707
Phone : (305)803-2736
Fax Number : (305)646-1527

****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
DIOS SEA LA GLORIA, INC.**

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

JAN 07 2021

T. SCOTT

FILED
2021 JAN -6 AM 9:46
STATE OF FLORIDA

2021 JAN -6 AM 10:52

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be: DIOS SEA LA GLORIA, INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address:

6987 W. 5 LANE

HIALEAH, FL. 33014

Mailing address, if different is:

6987 W. 5 LANE

HIALEAH, FL. 33014

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: THE PURPOSE OF THIS CORPORATION IS TO PREACH THE GOSPEL
FUNDS SHALL BE COLLETED THROUGH PRIVATE DONATIONS.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected and appointed: BY A MAJORITY
VOTE AT AN ANNUAL MEETING

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: NELSON TORRES (D & P)

Address: 6987 W. 5 LANE

HIALEAH, FL. 33014

Name and Title:

Address:

Name and Title: JULY RAMOS (D & S & T)

Address: 6987 W. 5 LANE

HIALEAH, FL. 33014

Name and Title:

Address:

Name and Title: NATALIA CABANAS (D & VP)

Address: 6987 W. 5 LANE

HIALEAH, FL. 33014

Name and Title:

Address:

2021 JAN -6 AM 9:46

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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: NELSON TORRES
 Address: 6987 W. 5 LANE
HIALEAH, FL. 33014

ARTICLE VII INCORPORATOR

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

Name: NELSON TORRES
 Address: 6987 W. 5 LANE
HIALEAH, FL. 33014

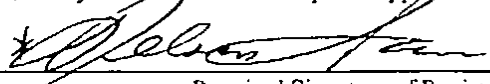
ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)

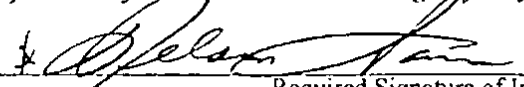
(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

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

 01/05/2021
 Required Signature of Registered Agent 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.

 01/05/2021
 Required Signature of Incorporator Date