

N21000002606

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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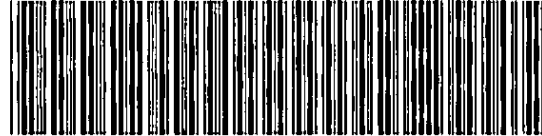
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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MAR 01 2021

COVER LETTER

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

SUBJECT: FLORIDA INTERNATIONAL 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: HENRY CHAVARRO
Name (Printed or typed)

407 LINCOLN ROAD, SUITE 12D
Address

MIAMI BEACH, FLORIDA 33139
City, State & Zip

(954) 865-6530
Daytime Telephone number

info@hecha corp.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: FLORIDA INTERNATIONAL FOUNDATION, INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address:

407 LINCOLN ROAD, SUITE 12D

MIAMI BEACH, FLORIDA 33139

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: FLORIDA INTERNATIONAL FOUNDATION, INC., is organized

exclusively for one or more of the purposes as specified in Section 501(c)(3) of the Internal Revenue Code, 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 corresponding section of any future federal tax code.

The Mission of FLORIDA INTERNATIONAL FOUNDATION, INC.. is to provide information, education and training, to promote

career-based opportunities for youth and young adults related to the construction trades, agriculture and landscaping. The foundation

will establish and implement domestic and international programs, activities and services to support this Mission.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected and appointed: Directors volunteered

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: HENRY CHAVARRO, President

Address: 407 LINCOLN ROAD, SUITE 12D

MIAMI BEACH, FLORIDA 33139

Name and Title: DALILA CHAVARRO, Secretary

Address: 407 LINCOLN ROAD, SUITE 12D

MIAMI BEACH, FLORIDA 33139

Name and Title: JUAN ORELLANA, Vice President

Address: 407 LINCOLN ROAD, SUITE 12D

MIAMI BEACH, FLORIDA 33139

Name and Title: JERRY CHAVARRO, Treasurer

Address: 407 LINCOLN ROAD, SUITE 12D

MIAMI BEACH, FLORIDA 33139

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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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: Henry Chavarro

Address: 407 Lincoln Road, Suite 12D

Miami Beach, Florida 33139

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TALLAHASSEE, FLORIDA

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Henry Chavarro

Address: 407 Lincoln Road, Suite 12D

Miami Beach, Florida 33139

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

1-22-21
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

1-22-21
Date