

N2100000 04755

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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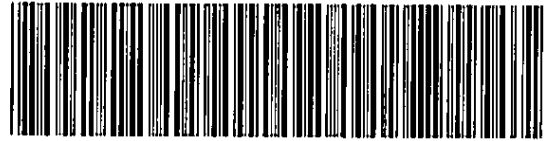
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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## COVER LETTER

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

**SUBJECT:** BRIGHT FUTURES EMPLOYMENT SERVICES CORP  
(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:** Carlos Ramirez  
Name (Printed or typed)

7760 W 20 Ave Suite 8  
Address

Hialeah, FL 33016  
City, State & Zip

305-519-4146  
Daytime Telephone number

CARLOS@CARLOS.R.COM

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

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

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

**ARTICLE I NAME**

The name of the corporation shall be: BRIGHT FUTURES EMPLOYMENT SERVICES CORP

**ARTICLE II PRINCIPAL OFFICE**

Principal street address:  
7760 W 20 AVE

Suite 8

Hialeah, FL 33016

Mailing address, if different is:  
PO BOX 126205

Hialeah, FL 33012

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: To find and provide employment and training for persons with disabilities.

Assist with employment retention and be productive and integrate into the community. Upon the dissolution of the corporation,

assets shall be distributed for one or more exempt purposes within the meaning of section 501(c)(3) of the Internal Revenue Code,

or the corresponding section of any future federal tax code, or shall be distributed to the federal government, or to a state or local

government, for a public purpose. Any such assets not so disposed of shall be disposed of by a Court of Competent Jurisdiction of the

county in which the principal office of the corporation is then located, exclusively for such purposes or to such organization or

organizations, as said Court shall determine, which are organized and operated exclusively for such purposes.

**ARTICLE IV MANNER OF ELECTION**

The manner in which the directors are elected and appointed: \_\_\_\_\_

As provided for in the Bylaws

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Carlos Ramirez Title: P

Address: 7760 W 20 Ave

Suite 8

Hialeah, FL 33016

Name and Title: Yoander Alonso Title: VP

Address: 7760 W 20 Ave

Suite 8

Hialeah, FL 33016

Name and Title: Jose Argueta Title: S

Address: 7760 W 20 Ave

Suite 8

Hialeah, FL 33016

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

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

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

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

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

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: Carlos Ramirez \_\_\_\_\_

Address: 7760 W 20 Ave Suite 8 \_\_\_\_\_

Hialeah, FL 33016 \_\_\_\_\_

**ARTICLE VII INCORPORATOR**

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

Name: Carlos Ramirez \_\_\_\_\_

Address: 7760 W 20 Ave Suite 8 \_\_\_\_\_

Hialeah, FL 33016 \_\_\_\_\_

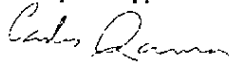
**ARTICLE VIII EFFECTIVE DATE:**

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.

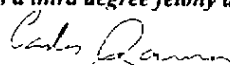
*Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity:*

  
\_\_\_\_\_  
Required Signature of Registered Agent

03/05/2021

\_\_\_\_\_  
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

03/05/2021

\_\_\_\_\_  
Date