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Division of Corporations  
 Florida Department of State  
 Division of Corporations  
 Electronic Filing Cover Sheet

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

From: Account Name : YOUR DREAM SERVICES CORP.  
 Account Number : I2020000137  
 Phone : (786)660-0108  
 Fax Number : (786)364-1047

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: info@yourdreamms.com

**FLORIDA PROFIT/NON PROFIT CORPORATION**

**Ayudalos Venezuela Corp**

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

2021  
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### COVER LETTER

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

**SUBJECT:** Ayudalos Venezuela 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:** Luis Fernando Quintero  
Name (Printed or typed)

1109 Hawthorne St  
Address

Houston TX, 77006  
City, State & Zip

305-842-8097  
Daytime Telephone number

ochoardv@gmail.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)

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**ARTICLE I NAME**

The name of the corporation shall be: Ayudalos Venezuela Corp

**ARTICLE II PRINCIPAL OFFICE**

Principal <u>street</u> address:	Mailing address, if different is:
<u>403 Sw 148th Ave</u>	
<u>Apt 10</u>	
<u>Pembroke Pines, FL 33027</u>	

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: fundraising for humanitarian aid in Venezuela, which includes the purchase and shipment from the US to Venezuela of medicines, medical supplies, prostheses, treatments and also in the food area, all kinds of food, canned goods or emergency kits, as well such as personal hygiene items, school supplies, clothing, shoes among other provisions for social assistance, also aims to finance educational and training programs, as well as courses to impart knowledge of trades that can help beneficiaries to have the possibility of decent work, being able to contemplate the contribution of resources for the establishment of micro-enterprises, purposes with no other interest in seeking assistance to the very precarious and needy Venezuelan population.

**ARTICLE IV MANNER OF ELECTION** The manner in which the directors are elected and appointed: votes

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

Name and Title: <u>Luis Fernando Quintero - P</u>	Name and Title: <u>Lucas Bernard Georges - VP</u>
Address: <u>1109 Hawthorne St</u>	Address: <u>44481 Livonia Ter</u>
<u>Houston, TX 77006</u>	<u>Ashburn, VA 20147</u>
Name and Title: <u>Daniela Valentina Rodriguez Ochoa- S</u>	Name and Title: <u>Parker Christopher Lane - T</u>
Address: <u>403 Sw 148th Ave</u>	Address: <u>1924 Adeline Dr</u>
<u>Apt 10</u>	<u>Yadkinville, NC 27055</u>
<u>Pembroke Pines, FL 33027</u>	
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: Daniela Valentina Rodriguez Ochoa

Address: 403 Sw 148th Ave Apt 10

Pembroke Pines, FL 33027

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**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Luis Fernando Quintero

Address: 1109 Hawthorne St

Houston, TX 77006

**ARTICLE VIII EFFECTIVE DATE:** 09/15/2021

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*

Daniela Valentina Rodriguez Ochoa  
Required Signature of Registered Agent

09/15/2021  
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.*

Luis Fernando Quintero  
Required Signature of Incorporator

09/15/2021  
Date

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