

N22000002951

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

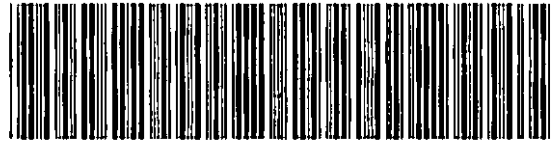
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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CD
2023 MAR -7 PM 11:43
OFFICE OF THE
CLERK OF THE
COURT
JULY 2024

COVER LETTER

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

Everyone Eats with Jesus, Inc.

SUBJECT: _____
(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

Law Office of Cynthia R. Vega PLLC

FROM: _____
Name (Printed or typed)

5104 SW 131 Ave.

Address

Miami, FL 33175

City, State & Zip

305-570-0551

Daytime Telephone number

cynthia@cynthiavegalaw.net

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

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

FILED
MAR - 7 PM 11:44
TALLAHASSEE, FLORIDA
DIVISION OF CORPORATIONS
STATE OF FLORIDA

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

ARTICLE I NAME Everyone Eats with Jesus, Inc.
The name of the corporation shall be: _____

ARTICLE II PRINCIPAL OFFICE

Principal street address:
111 E. Flagler St. Apt. 802
Miami, FL 33131

Mailing address, if different is: _____

ARTICLE III PURPOSE

_____ for charitable purposes, specifically to provide food.
The purpose for which the corporation is organized is: _____
shelter and counseling to the homeless people.

ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected and appointed: _____ as per Bylaws.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

| | |
|--|--|
| Name and Title: President - Erika Agosto | Name and Title: Secretary - Vanessa M. Collazo Vazquez |
| Address: 111 E. Flagler St., Apt. 802 | Address: Estancias De Tortuguero |
| Miami, FL 33131 | Turin 605, Vega Baja P.R. 00693 |

| | |
|--|--|
| Name and Title: Vice President - Sara Repanich | Name and Title: Treasurer - Ryan J. Agosto Collazo |
| Address: 111 E. Flagler St., Apt. 902 | Address: Estancias De Tortuguero |
| | Turin 605, Vega Baja P.R. 00693 |

| | |
|---|---|
| Name and Title: Director - Stephanie Rivera | Name and Title: Director - Luis E. Montalvo Oquendo |
| Address: 1362 NE 114th Terrace | Address: 1362 NE 114th Terrace |
| Miami, FL 33161 | Miami, FL 33161 |

| | |
|------------------------------|--------------------------------|
| Director - Carmen J. Serrano | Director - Tanner Lakey |
| Name and Title: _____ | Name and Title: _____ |
| 2841 NE 163rd St., Apt. 210 | 425 NE 22nd St., Apt. 808 |
| Address: _____ | Address: _____ |
| North Miami Beach, FL 33160 | Miami, FL 33137 |
| _____ | _____ |
| _____ | _____ |
| Director - Randall Coto | Director - Kristina V. Cabrera |
| Name and Title: _____ | Name and Title: _____ |
| 7950 NE Bayshore Ct., W1400 | 460 NE 28th St., # 706 |
| Address: _____ | Address: _____ |
| Miami, FL 33138 | Miami, FL 33137 |
| _____ | _____ |
| _____ | _____ |

ARTICLE VI REGISTERED AGENT

The **name and Florida street address** (P.O. Box NOT acceptable) of the registered agent is:

Law Office of Cynthia R. Vega PLLC
 Name: _____
 5104 SW 131 Ave.
 Address: _____
 Miami, FL 33175

ARTICLE VII INCORPORATOR

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

Cynthia R. Vega, Esq.
 Name: _____
 5104 SW 131 Ave.
 Address: _____
 Miami, FL 33175

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

02/10/2022
 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

02/10/22
 Date

FILED
 02/10/2022
 7 PM 11:44
 DEPARTMENT OF STATE
 1
 MIAMI, FLORIDA