

NA2200007031

Florida Department of State
Division of Corporations
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FLORIDA PROFIT/NON PROFIT CORPORATION
4YOU2022 CORP

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ARTICLES OF INCORPORATION

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

ARTICLE I NAMEThe name of the corporation shall be: 4You2022 CORP**ARTICLE II PRINCIPAL OFFICE**Principal street address:151 S Missouri street Labelle FL 33935

Mailing address, if different is:

1050 Muriel BLVD Labelle FL
33935**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: Provide community services for low income families such as
financial assistance, Food , living essential, Medical bills, Equipment , Transportation etc. Provide employee
Payroll & company equipments

ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected and appointed:by the bylaws**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: Mari luz paulin -(P)Address 1000 sw 142 Ave
Miami FL 33184Name and Title: Teresa B Alfonso -(VP)Address: 16331 NW 84 Court
Miami Lakes ,FL 33016Name and Title: Alexis Molina -(VP)Address 1000 sw 142 Ave
Miami FL 33184Name and Title: Joel C Armas -(VP)Address: 16331 NW 84 Court
Miami Lakes FL 33016

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: Mari Luz Paulin _____

Address: 1000 SW 142 Ave _____

Miami FL 33184 _____

ARTICLE VII INCORPORATORThe name and address of the Incorporator is:

Name: Mari Luz Paulin _____

Address: 1000 SW 142 Ave _____

Miami FL 33184 _____

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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_____
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_____
Date