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FLORIDA DEPARTMENT OF STATE Division of Corporations

July 26, 2022

Miguel A MICHELA MUNOZ

5103 COBBLE SHORES WAY

WIMAUMA, FL 33598

SUBJECT: HISPANIC CULTURE CLUB OF VL (NC Ref. Number: W22000097388

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The name must contain a word that will clearly indicate that it is a corporation. This word may be: CORPORATION, CORP., INCORPORATED, or INC. Sections 617.0401(1)(a) and 617.1506(1), Florida Statutes, prohibits the use of the word COMPANY or CO. in the name of a non-profit corporation.

If you have any further questions concerning your document, please call (850) 245-6052.

Hyacinth LeBlanc Regulatory Specialist II New Filing Section

Letter Number: 322A00016656

If you have additional questions or need further assistance, please call the Division of Corporations at (850) 245-6052 and press 4. Your call will be answered in the order it is received.

Hyacinth LeBlanc ANNUAL REPORTS SECTION

Letter number: 322A00016656

New Filing Section

COVER LETTER

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

SUBJECT:	His	- 11,0	Culture	Club	of	VL	
	•	(PROPOSE	D CORPORATE	NAME - N	MUST IN	CLUDE SUFFIX)	

Enclosed is an original and one (1) copy of the Articles of Incorporation and a check for :

\$70.00 \$78.75 Filing Fee & Certificate of

Filing Fee & Filin
Certificate of & C
Status

□\$78.75 □ \$87.50

Filing Fee
& Certified Copy
& Certificate

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FROM: Migvel A Muno 2

Name (Printed or typed)

A 5103 (obble Shares Way
Address

Winauma Fl. 33598

City, State & Zip

813-486-7569

Daytime Telephone number

Mam 125705 @ qmail, Lom E-mail address: (to be used for future annual report notification)

ARTICLES OF INCORPORATION

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

coting, Socializing Sharing the Hispanic Cult
coting, Socializing Sharing the Hispanic Cult
ed and appointed: By Majer,

Name and Title:	Name and Title:	·
Address	Address:	
		
Name and Title:	Name and Title:	
	Address:	
- Indicess	Address.	
		
ARTICLE III BEGISTERER ACE	and the second s	
The name and Florida street address (NI (P.O. Box NOT acceptable) of the registered agent is:	
Name: Migsel	A Mungz	
Address: 5/03 (06	ble Shores Way	
•	a Fl. 33598	
<u>w//www</u>	(4, 1 (.) 5 3 - (8	
ARTICLE VII INCORPORATOR		
The <u>name and address</u> of the Incorpora		
Name: /lique	AMUNOZ	
Address: \$ 5103 (06	A Mungz ble Shores Way	
Winaun	a Fl. 33598	
ARTICLE VIII EFFECTIVE DATE		
Effective date, if other than the date of (If an effective date is listed, the date	filing: (OPTIO) must be specific and cannot be more than five da	NAL) avs prior or 90 days after the filing)
	does not meet the applicable statutory filing require	•
Having been named as registered ages certificate, I am familiar with and accep	nt to accept service of process for the above stated of the appointment as registered agent und agree to a	corporation at the place designated in this ct in this capacity
and I want		7/6/2002
· -	mature of Registered Agent	Date
I submit this document and affirm that the Department of State constitutes a the	the facts stated herein are true. I am aware that any f ird degree felony as provided for in s.817.155, F.S.	alse information submitted in a document to
MUM		7/6/202
Require	d Signature of Incorporator	
		