

N22000010341

Florida Department of State
Division of Corporations
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To:

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

From:

Account Name : TPBS CORP
Account Number : I20190000112
Phone : (786)389-2779
Fax Number : (305)356-3688

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

Email Address: _____

**FLORIDA PROFIT/NON PROFIT CORPORATION
INNER HOME SANCTUARY CORP**

Certificate of Status	1
Certified Copy	0
Page Count	01
Estimated Charge	\$78.75

28

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be: INNER HOME SANCTUARY CORP

ARTICLE II PRINCIPAL OFFICE

Principal street address:

12923 SW 48 ST

MIAMI, FL 33175

Mailing address, if different is:

12923 SW 48 ST

MIAMI, FL 33175

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: The purpose of this organization is to help single parents who have become homeless due to abuse, trauma, loss of income and other factors by creating a safe space of transition where they can get back on their feet and rebuild their life.

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

AS PROVIDED FOR IN THE BY LAWS

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: ANAISA C AZCUY DIRECTOR

Address

12923 SW 48 ST

MIAMI, FL 33175

Name and Title: _____

Address: _____

Name and Title: PEDRO J TRAVIESO DIRECTOR

Address

12923 SW 48 ST

MIAMI, FL 33175

Name and Title: _____

Address: _____

Name and Title: JUANE AZCUY DIRECTOR

Address

12923 SW 48 ST

MIAMI, FL 33175

Name and Title: _____

Address: _____

Name and Title: INAISSA QUINONES TREASURER Name and Title: _____
Address: 12923 SW 48 ST Address: _____
MIAMI, FL 33175 _____

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: ANAISA C AZCUY
Address: 12923 SW 48 ST
MIAMI, FL 33175

ARTICLE VII INCORPORATOR

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

Name: ANAISA C AZCUY
Address: 12923 SW 48 ST
MIAMI, FL 33175

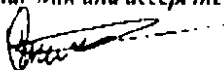
ARTICLE VIII EFFECTIVE DATE:

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

9/6/22

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

9/6/22

Date

SEP 08 2022 11:59