

**N22000012177**

Florida Department of State

Division of Corporations  
Electronic Filing Cover Sheet

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To:

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

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**FLORIDA PROFIT/NON PROFIT CORPORATION  
MISIONEROS DE NACIONES INC**

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

2022 OCT 26 PM 3:27

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

**ARTICLE I NAME**The name of the corporation shall be: MISIONEROS DE NACIONES INC**ARTICLE II PRINCIPAL OFFICE**Principal street address:9348 SW 146 pl  
MIAMI, FL, 33186

Mailing address, if different is:

SAME**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

IT IS AN ASSOCIATION TO  
GIVE FOOD, MEDICINE, SCHOOL SUPPLIES TO  
CHILDREN AND GIVEN THEM CHRISTIAN TEACHING  
PUTTING VALUES AND REAFFIRMING THEIR  
IDENTITY AND HOW IMPORTANT THEY ARE FOR  
THE COMMUNITY**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: Leydis de la Peña Name and Title: PresidentAddress: 9348 SW 146 pl Address: SAMEMIAMI FL 33186Name and Title: Rolando Ajala Name and Title: Vice presidentAddress: 9348 SW 146 pl Address: SAMEMIAMI FL 33186

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_ Address: \_\_\_\_\_

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: Leydis de la Peña  
Address: 9348 SW 146 pl  
Miami FL 33186

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Leydis de la Peña  
Address: 9348 SW 146 pl  
Miami FL 33186

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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

10/26/22  
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

10/26/22  
Date