

N23000006546

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

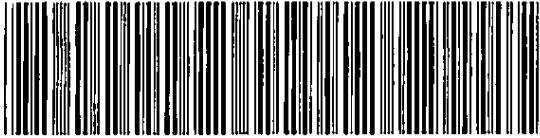
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

W23000068137

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2023 MAY 12 AM 2:00
SECRETARY OF STATE
TALLAHASSEE, FL

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APR 26 2023



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 12, 2023

MARIA ESTHER BOHORQUEZ
2012 AVON BLVD
KISSIMMEE, FL 34741 US

SUBJECT: PROYECTO ESERANZA HOPE, INC
Ref. Number: W23000069137

We have received your document for and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

If using our documents to submit the required information all relevant information should be provided on those forms as well as signatures must be on those forms.,

The registered agent must sign accepting the designation.

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

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

KAIN COSTELLO
Regulatory Specialist II
New Filing Section

Letter Number: 423A00010835

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TALLAHASSEE, FL

COVER LETTER

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

SUBJECT: Proyecto Esperanza Hope, inc.

(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

FROM: Maria Esther Bohorquez

Name (Printed or typed)

2012 Avon Blvd.

Address

Kissimmee, Florida 34741

City, State & Zip

407-874-4651

Daytime Telephone number

meemunah1027662gmail.com

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

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2023 MAY 12 AM 2:01
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TALLAHASSEE, FL

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

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

ARTICLE I NAME

The name of the corporation shall be: Proyecto Esperanza Hope INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address:
2012 Avon Blvd, Kissimmee, Fl. 34741

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: _____
Said corporation is organized exclusively for charitable, religious, educational purposes, including, for such purposes,
the making of distributions to organizations that qualify as exempt organizations under section 501(c)(3) of the Internal Revenue Code
or the corresponding section of any future federal tax code.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected and appointed: The Trustees
shall be composed of at least 3 members who are nominated by the President
and approved by a majority vote of the then-existing Trustees.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Maria Esther Bohorquez, Pres.

Name and Title: Venicia Comelia Manzi, Secretary

Address: 2012 Avon Blvd, Kissimmee, Fl. 34741

Address: 2012 Avon Blvd, Kissimmee, Fl. 34741

Name and Title: _____

Name and Title: _____

Address: _____

Address: _____

Name and Title: _____

Name and Title: _____

Address: _____

Address: _____

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SECRETARY OF STATE
TALLAHASSEE, FL

FILED

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: Maria Esther Bohorquez
Address: 2012 Avon Blvd, Kissimmee, FL 34741

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Maria Esther Bohorquez
Address: 2012 Avon Blvd, Kissimmee, FL 34741

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
4/18/2023
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
4/18/2023
Date

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DEPT. OF STATE
TALLAHASSEE, FL