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Florida Department of State  
Division of Corporations  
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To: Division of Corporations  
Fax Number : (850)617-6381

From: Account Name : FASTKIT CORP  
Account Number : 120100000009  
Phone : (305)599-0839  
Fax Number : (305)592-9591

*2nd Request*

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

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STATE

FLORIDA PROFIT/NON PROFIT CORPORATION  
DE ISRAEL A LAS NACIONES INC

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$78.75

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Help

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

**ARTICLE I NAME**

The name of the corporation shall be: DE ISRAEL A LAS NACIONES INC.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address:

111 NW 133 Rd Ter Apt 308

Plantation FL 33325

Mailing address, if different is:

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Our social purpose is to use digital platforms, social media, congregations, to spread the message of the Torah and Yeshua of Israel to the Nations, make musical events, physical and online conferences, artistic events with the purpose of spreading and promote the message of the Kingdom of Heaven on Earth

**ARTICLE IV MANNER OF ELECTION** The manner in which the directors are elected and appointed: Will be elected by the non-profit incorporator.

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Rosa A. Rich Wing - President/Secretary

Address: 1241 NW 188th Terr  
Miami FL 33169

Name and Title: Naider Johanna Loaiza - Director

Address: 111 NW 133 Rd Ter Apt 308  
Plantation FL 33325

Name and Title: Monica Estrella Orozco - Director

Address: 8854 NW 103rd Path  
Doral FL 33178

Name and Title: Ludivina Alonso Rubio - Director

Address: 5419 Wauchula Ct  
Orlando FL 32839

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: Rosa A. Rich Wing

Address: 1241 NW 188th Terr

Miami FL 33169

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Rosa Amalia Rich Wing

Address: 1241 NW 188th Terr

Miami FL 33169

**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

09/07/2023

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 8.81215, F.S.*

Required Signature of Incorporator

09/07/2023

Date

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