

N24000011633

(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:

W24000128275

Office Use Only

CF - 105⁰⁰



300435226113

09/04/24--01038--001 **105.00

~~09/04/24--01038--001 **105.00~~
~~09/04/24--01038--001 **105.00~~

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2024 OCT -2 PM 1:46

FILED

Florida Sept 24, 2024

Florida Department of State
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe St. Suite 810
Tallahassee, FL 32303

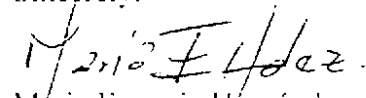
Subject: Submission of Corrected Documents for *Si Puedes*, Inc.
In response to Letter Number: 524A00020474.
Ref. Number: W24000128275

Dear Division of Corporation Team:

Please find enclosed the corrected documents for *Si Puedes*, Inc., as requested in your letter.

Thank you for your attention.

Sincerely,


Maria Eugenia Hernández



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 12, 2024

MARIA E. HERNANDEZ-LANE
4291 S. TAMIAMI TRAIL
#1010
VENICE, FL 34293 US

SUBJECT: SI PUEDES, INC.
Ref. Number: W24000128275

RECEIVED
2024 OCT -2 AM 11:45
SECRETARY OF STATE
TALLAHASSEE, FL

We have received your document for SI PUEDES, INC. and check(s) totaling \$105.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

Statute 617.0803 reads a nonprofit corporation must have 0 directors or 3 directors. Please amend the document to either have three directors or no directors. You may have officers without directors such as President, Vice President, etc. Each page of your document must be one-sided. Please do not print on each

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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

Monique K Anderson
Regulatory Specialist II

Letter Number: 524A00020474

FILED
2024 OCT -2 PM 1:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Certificate of Conversion
For
"Other Business Entity"
Into
Florida ~~Profit~~ Corporation
~~Non-Profit~~

This Certificate of Conversion and attached Articles of Incorporation are submitted to convert the following "Other Business Entity" into a Florida ~~Profit~~ Corporation in accordance with s. 607.11⁶⁰⁷~~15~~, Florida Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of this Certificate of Conversion is:

SI PUEDES

Enter Name of Other Business Entity

2. The "Other Business Entity" is a

Limited Liability Company

(Enter entity type. Example: limited liability company, limited partnership, general partnership, common law or business trust, etc.)

First organized, formed or incorporated under the laws of

Wyoming

(Enter state, or if a non-U.S. entity, the name of the country).

on

July 6, 2018

Enter date "Other Business Entity" was first organized, formed or incorporated

3. If the jurisdiction of the "Other Business Entity" was changed, the state or country under the laws of which it is now organized, formed or incorporated:

Florida

4. The name of the Florida ~~Profit~~ Corporation as set forth in the attached Articles of Incorporation:

SI PUEDES, Inc.

Enter Name of Florida ~~Profit~~ Corporation
~~Non-Profit~~

5. If not effective on the date of filing, enter the effective date: _____

(The effective date: Cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State.)

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.

Signed this _____ day of _____, 20_____.

Required Signature for Florida Profit Corporation:

Signature of Chairman, Vice Chairman, Director, Officer, or, if Directors or Officers have not been selected, an Incorporator: Maria E. Hernandez

Printed Name: MARIA E. HERNANDEZ-LANE Title: President

Required Signature(s) on behalf of Other Business Entity: [See below for required signature(s).]

Signature: Maria E. Hernandez

Printed Name: Maria E. Hernandez-Lane Title: Manager

Signature: _____

Printed Name: _____ Title: _____

Signature: _____

Printed Name: _____ Title: _____

Signature: _____

Printed Name: _____ Title: _____

Signature: _____

Printed Name: _____ Title: _____

Signature: _____

Printed Name: _____ Title: _____

If Florida General Partnership or Limited Liability Partnership:

Signature of one General Partner.

If Florida Limited Partnership or Limited Liability Limited Partnership:

Signatures of ALL General Partners.

If Florida Limited Liability Company:

Signature of a Member or Authorized Representative.

All others:

Signature of an authorized person.

<u>Fees:</u>	
Certificate of Conversion:	\$35.00
Fees for Florida Articles of Incorporation:	\$70.00
Certified Copy:	\$3.75 (Optional)
Certificate of Status:	\$8.75 (Optional)

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2024 OCT -2 PM 1:46
CLERK OF STATE
TALLAHASSEE, FLORIDA

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

ARTICLE I NAME

The name of the corporation shall be: SI PUEDES, INC.

ARTICLE II PRINCIPAL OFFICE

Principal ~~street~~ address:

4291 S. Tamiami Trail #1010

Venice, FL 34293

Mailing address, if different is:

ARTICLE III PURPOSE : The purpose for which the corporation is organized is: To improve the wellbeing of Latinos through educational and charitable activities focused on personal development. SI PUEDES, INC. is a nonprofit corporation and shall operate exclusively for educational and charitable purposes within the meaning of Section 501 (c) (3) of the Internal Revenue Code, or the corresponding section of any future Federal Tax Code.

The corporation provides personal development coaching, mentoring, training, and personal growth tools to Latinos facing socioeconomic challenges. These services may include group and individual sessions, workshops, conferences, and retreats. Additionally, the corporation facilitates forums for interaction, problem-solving, and discussion among leaders and underserved Hispanic communities to promote personal and professional growth. Through these activities, the corporation seeks to empower Latino individuals and communities, thereby enhancing their ability to achieve self-sufficiency and success.

To maximize our impact on current efforts, we may seek to collaborate with other non-profit organizations, which fall under the 501 (c) (3) section of the Internal Revenue Code and are operated exclusively for educational and charitable purposes.

At times, per the discretion of the board of directors, we may provide internships or volunteer opportunities which will provide opportunities for involvement in said activities and program in order to have a greater impact for change. **See more in Attachment**

ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected and appointed: The directors of the corporation are elected and appointed in accordance with the organization's bylaws. Directors are elected by a majority vote of the members of the board at the annual meeting, which is held on a predetermined date each year.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Maria E. Hernandez-Lane - President

Address: 4291 S. Tamiami Trail #1010

Venice, FL 34293

Name and Title: Sr. Judith Rojas - Secretary

Address: 333 South Seton Ave.

Emmitsburg, MD 21727

Name and Title: Olga L. Nino - Treasurer

Address: 448 Lincoln Ave.

Bellmawr, NJ 08031

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2024 OCT -2 PM 1:46

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 E. Hernandez-Lane
Address: 4291 S. Tamiami Trail #1010
Venice, FL 34293

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CLERK OF STATE
TALLAHASSEE, FLORIDA

ARTICLE VII INCORPORATOR

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

Name: John Lane
Address: 4291 S. Tamiami Trail #1010
Venice, FL 34293

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

Maria E. Hernandez-Lane
Required Signature of Registered Agent

9-24-2024
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.

John Lane
John LANE Required Signature of Incorporator

9-24-2024
Date