

OFFICE USE ONLY (Document #)

LAZARUS CORPORATE FILING SERVICE, INC.

(Requestor's Name)

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MIAMI, FLORIDA (305) 552-5973

(City, State, Zip) (Phone #)

LOCAL REPRESENTATIVE TALLAHASSEE

800002784408--5

-02/23/99--01047--017

*****78.75 *****78.75

OFFICE USE ONLY

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. REMANSO DE AMOR FOUNDATION, INC.
(Corporation Name) (Document #)

2. _____
(Corporation Name) (Document #)

3. _____
(Corporation Name) (Document #)

4. _____
(Corporation Name) (Document #)

☒ Walk in ☒ Pick up time 2:00

☒ Certified Copy

☐ Mail out ☐ Will wait

☐ Photocopy

☐ Certificate of State

FILED
99 FEB 23 PM 12:57
SECRETARY OF STATE
TALLAHASSEE FLORIDA

NEW FILINGS	
<input checked="" type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

Examiner's Initials

ARTICLES OF INCORPORATION

FOR
REMANSO DE AMOR FOUNDATION, INC.

99 FEB 23 PM 12:57
SECRETARY OF STATE
TALLAHASSEE FLORIDA

FILED

The undersigned, acting as incorporator(s) of a corporation pursuant to chapter 617, Florida Statutes, adopt(s) the following Articles of Incorporation:

Remanso de Amor Foundation, Inc.

ARTICLE I NAME

The name of the corporation shall be:

Remanso de Amor Foundation, INC.

ARTICLE II PRINCIPAL PLACE OF BUSINESS AND MAILING ADDRESS

The principal place of business and the mailing address of this corporation shall be:

5333 Collins Avenue, Suite # 1211
Miami Beach, Florida, 33140

ARTICLE III PURPOSE(S)

The specific purpose(s) for which the corporation is organized is (are):

It is an institution that offers a educational, health and training development plan for childrens, young peoples, and adults lacking economic resources, forming families to be more affective, jointly responsible; offering them an integrity care reaffirming the initiative for the human growth.

ARTICLE IV MANNER OF ELECTION OF DIRECTORS

The manner in which the directors are elected or appointed is as follows:

Directors will be elected to hold office until the first annual meeting of the shareholders and until a successor shall have been elected and qualified, or until their earlier resignation, removal from office, or death.

ARTICLE V LIMITATION OF CORPORATE POWERS

The corporate powers of this corporation are as provided in section 617.0302, Florida Statutes, unless limited as follows:

There are not current limitations.

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and the street address of the initial registered agent is:

THALIA PUENTE
5333 Collins Avenue Suite # 1211
Miami Beach, Florida, 33140

ARTICLE VII INCORPORATORS

The name(s) and street address(es) of the incorporator(s) for these Articles of Incorporation is(are):

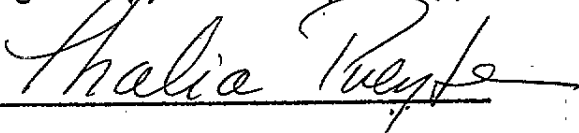
THALIA PUENTE
5333 Collins Avenue, Suite #1211
Miami Beach, Florida, 33140

ELIZABETH PEREZ
2245 S.W. 11 Ter.
Miami, Florida, 33135

ARMANDO A. ANTELO
7164 S.W. 103 Court Circle
Miami, Florida, 33156

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this
18 day of February, 19 99.

Signature(s) of the Incorporator(s)



THALIA PUENTE

Typed name of Incorporator signing

Typed name of Incorporator signing

Typed name of Incorporator signing

CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of sections 607.0501 or 617.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

1. The name of the corporation is: REMANSO DE AMOR FOUNDATION, INC.

2. The name and address of the registered agent and office is:

THALIA PUENTE
(NAME)

5333 Collins Avenue Suite # 1211
(P.O. BOX NOT ACCEPTABLE)

Miami Beach, Florida, 33140
(CITY/STATE/ZIP)

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

SIGNATURE

Thalia Puente

DATE February 18, 1999

REGISTERED AGENT FILING FEE: \$35.00

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99 FEB 23 PM 12:57
SECRETARY OF STATE
TALLAHASSEE FLORIDA