WO3ID OFFI 500002878625--4 -05/18/99--01031--005_ *****48.75 *****48.75 ARUS CORPORATE FILING SERVICE, INC. (Requestor's Name) 3320 S.W. 87th AVENUE (Address) 500002878625--4 -05/18/99--01031--006 MIAMI, FLORIDA (305)552-5973 *****30.00 *****30.00 (City, State, Zip) LOCAL REPRESENTATIVE TALLAHASSEE OFFICE USE ONLY CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known): (Corporation Name) (Document #) 3. (Corporation Name) (Document #) (Corporation Name) (Document #) Pick up time Walk in Certified Copy Will wait Certificate of Status Mail out Photocopy AMENDMENTS NEW FILINGS Amendment Profit Resignation of R.A., Officer/Director NonProfit Limited Liability Change of Registered Agent Domestication Dissolution/Withdrawal Other Merger REGISTRATION/ OTHER FILINGS QUALIFICATION Annual Report Foreign Fictitious Name Limited Partnership Name Reservation VIII: 5 Reinstatement Trademark Other

Examiner's Initials



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

May 18, 1999

LAZARUS

MIAMI, FL

SUBJECT: NICARAGUAN AMERICAN FOUNDATION CORP.

Ref. Number: W99000011636

We have received your document for NICARAGUAN AMERICAN FOUNDATION CORP.. However, the document has not been filed and is being returned for the following:

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Simply adding "of Florida" or "Florida" to the end of a name is not acceptable. Please select a new name and make the correction in all appropriate places. One or more words may be added to make the name distinguishable from the one presently on file.

Please return the original and one copy of 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) 487-6934.

Loria Poole Corporate Specialist

Letter Number: 399A00027533

PECHVED PH 2: 59
99 MAY 19 PH 2: 59
MANAGERIAN SERVINGS
AURIST SERVINGS
AURIS SERVINGS
AURIS

ARTICLES OF INCORPORATION

FOR

NICARAGUAN AMERICAN FOUNDATION REFUGEES CORP.

The undersigned, acting as incorporator(s) of a corporation pursuant to chapter 647, Florida Statutes, adopt(s) the following Articles of Incorporation:

ARTICLE I NAME

The name of the corporation shall be: NICARAGUAN AMERICAN FOUNDATIONS REFUGEES CORP.

ARTICLE II PRINCIPAL PLACE OF BUSINESS AND MAILING ADDRESS

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

10432 S.W. 133 Place Miami, F1 33186

ARTICLE III PURPOSE(S)

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

NON-PROFIT

Providing Social Benefits for the Nicaraguan Community

ARTICLE IV MANNER OF ELECTION OF DIRECTORS

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

DONALD J PERNUDI PRESIDENT

SOCRATES CASTRILLO VICE_PRESIDENT

REV FR RAFAEL MENDOZA..... SECRETARY

ELECTED BY MINUTES AND BY-LAWS

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:

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

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

DONALD J PERNUDI 10432 S.W. 133 Place Miami, Florida 33186

ARTICLE VII INCORPORATORS

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

DONALD J PERNUDI	10432 S.W. 133 Pl, Miami, Fl	33186
SOCRATES CASTRILLO	3071 S.W. 27 Ave # 9, Miami,	F1 33133
REV FR RAFAEL MENDOZA	3009 N.W. 11 Terrace, Miami.	

The undersigned incorporator(s)	has(have) executed these Artic	des of incorporation this
14th day of may	,1 9 99	

Signature(s) of the Incorporator(s)

REV FR RAFAEL MENDOZA

DONALD J PERNUDI

Typed name of incorporator signify

SOCRATES CASTRILLO

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: NICARAGUAN AMERICAN FOUNDATION REFUGEES CORP.		
2.	The name and address of the registered agent and office is:		
	DONALD J PERNUDI		
	(NAME)		
	10432 S.W. 133 Place, Miami, fl 33186		
	(P.O. BOX <u>NOT</u> ACCEPTABLE)		
	(CITY/STATE/ZIP)		

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STAJED 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

DATE

May 14, 1999

SERRETARY OF STATE AND SEE FLORILE

REGISTERED AGENT FILING FEE: \$35.00