

# N9900004127

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LAZARUS CORPORATE FILING SERVICE, INC.

(Requestor's Name)

3320 S.W. 87th AVENUE

(Address)

MIAMI, FLORIDA (305)552-5973

(City, State, Zip) (Phone #)

LOCAL REPRESENTATIVE TALLAHASSEE

100002926361--2

-07/08/99--01059--003

\*\*\*\*\*78.75 \*\*\*\*\*78.75

OFFICE USE ONLY

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

1. SIERVAS DE NUESTRO SENOR  
(Corporation Name) (Document #)
2. (OUR FATHER Sheep Inc.)  
(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 Status

RECEIVED  
 99 JUL -8 AM 11:20  
 DEPARTMENT OF STATE  
 DIVISION OF CORPORATIONS  
 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

FILED  
 99 JUL -8 AM 9:14  
 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA  
 Requested by [Signature]

Examiner's Initials



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State

July 8, 1999

LAZARUS

MIAMI, FL

SUBJECT: SIERVAS DE NUESTRO SENOR  
Ref. Number: W99000015702

We have received your document for SIERVAS DE NUESTRO SENOR. However, the document has not been filed and is being returned for the following:

The name of the corporation must contain a corporate suffix. This suffix may be: CORPORATION, CORP., INCORPORATED, or INC. Sections 617.0401(1)(a) and 617.1506(1), Florida Statutes, prohibits the use of the word COMPANY or CO. in the name of a non-profit corporation.

Please provide an English translation for the entity's name in your cover letter.

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: 599A00035437

*DEAR FATHER SHEEP INC.*

**ARTICLES OF INCORPORATION**

**FOR**

SIERVAS DE NUESTRO SENOR INC.

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

**ARTICLE I NAME**

The name of the corporation shall be: SIERVAS DE NUESTRO SENOR INC.

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

99 JUL 7 - 8 PM 3:14

FILED

**ARTICLE II PRINCIPAL PLACE OF BUSINESS AND MAILING ADDRESS**

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

398 S.W. 79Th Court  
Miami, Fla 33144

**ARTICLE III PURPOSE(S)**

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

Religious purposes

**ARTICLE IV MANNER OF ELECTION OF DIRECTORS**

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

Lily Del Rosario Portocarrero (President) 398 S.W. 79Th Ct Miami, Fla. 33144

Alba Portocarrero (Secretary) 398 S.W. 79Th Ct Miami, Fla 33144

Election Of Directors shall be stated in the by laws

German Belline 398 S.W. 79th Ct. , Miami, Fl 33144

**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:

Alba Portocarrero  
398 S.W. 79Th Ct  
Miami, Fla. 33144

**ARTICLE VII INCORPORATORS**

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

Alba Portocarrero  
398 S.W. 79Th Ct  
Miami, Fla 33144.

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this 6 day of July, 19 99.

Signature(s) of the Incorporator(s)

*Alba Portocarrero*

\_\_\_\_\_

\_\_\_\_\_

Alba Portocarrero

\_\_\_\_\_  
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: Siervas De Nuestro Senor **INC.**

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

Alba Portocarrero

(NAME)

398 S.W. 79Th Court

(P.O. BOX NOT ACCEPTABLE)

Miami, Fla 33144

(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

*Alba Portocarrero*

DATE

7-6-99

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

99 JUL -8 PM 3:14

**FILED**

REGISTERED AGENT FILING FEE: \$35.00