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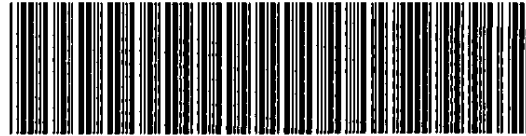
(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS
2011 JUN 10 PM 2:29

6/13/11

COVER LETTER

Department of State
New Filing Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

SUBJECT: Sarah's Promise, Inc.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☒ \$70.00 Filing Fee
☐ \$78.75 Filing Fee
& Certificate of Status

☐ \$78.75 Filing Fee
& Certified Copy
☐ \$87.50 Filing Fee,
Certified Copy
& Certificate of
Status
ADDITIONAL COPY REQUIRED

FROM: Sarah's Promise, Inc.

Name (Printed or typed)

10889 N.W. 8th Street

Address

Pembroke Pines, FL 33026

City, State & Zip

786-303-2779

Daytime Telephone number

CisnerosC08@yahoo.com

E-mail address: (to be used for future annual report notification)

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NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be: Sarah's Promise, Inc.

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DIVISION OF CORPORATION

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ARTICLE II PRINCIPAL OFFICE

Principal street address
10889 N.W. 8th Street
Pembroke Pines, FL 33026

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
Sales of vacation Packages

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Cristina Cisneros Pres.	Name and Title: _____
Address: 10889 N.W. 8th Street	Address: _____
Pembroke Pines, FL 33026	_____
_____	_____
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: Cristina Cisneros
Address: 10889 N.W. 8th Street
Pembroke Pines, FL 33026

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Cristina Cisneros
Address: 10889 N.W. 8th Street
Pembroke Pines, FL 33026

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

Cristina Cisneros

Required Signature/Registered Agent

June 7, 2011

Date

I submit this document and affirm that the facts stated herein are true. I am aware that the 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.

Cristina Cisneros

Required Signature/Incorporator

June 7, 2011

Date