

06/23/2032

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Division of Corporations
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**FLORIDA PROFIT/NON PROFIT CORPORATION
LEVANTATE COMO LAS AGUILAS MINISTRIES CORPORATION**

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ARTICLES OF INCORPORATION
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The undersigned Incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of incorporation.

ARTICLE I - NAME

The name of the corporation shall be:

LEVANTATE COMO LAS AGUILAS MINISTRIES CORPORATION

ARTICLE II - PRINCIPAL OFFICE

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

3210 SW, 24TH Street,
Miami, Florida 33145

ARTICLE III - SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

500 COMMON STOCKS OF A PAR VALUE OF \$ 1.00 EACH

ARTICLES IV - INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

EZEQUIEL R GONZALEZ
3210 SW, 24TH Street,
Miami, Florida 33145

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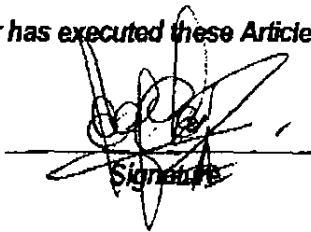
ARTICLE V - INCORPORATOR

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The name and street address of the incorporator to these Articles of Incorporation is:

EZEQUIEL R GONZALEZ
3210 SW, 24th Street,
Miami, Florida 33145

*The undersigned incorporator has executed these Articles of incorporation this
1^o day of August 2014*


Signature

ARTICLE VI - DIRECTOR (S)

*The name(s) and street address (es) of the director(s) to these Articles of Incorporation
is (are):*

EZEQUIEL R GONZALEZ (President)
ORLANDO R PARAMO (Vice-President)
3210 SW, 24th Street,
Miami, Florida 33145

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

*Having been named as Registered Agent and to accept service of process for the
above stated corporation at 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 related to the proper and complete
performance of my duties, and I am familiar with and accept the obligations of my
position as Registered Agent*


Registered Agent Signature

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