

P15000010812

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(Address)

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☐ PICK-UP

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(Business Entity Name)

(Document Number)

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W1500003885

FEB 03 2015

T. SCOTT



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01/13/15--01009--013 \*\*70.00

15 FEB -2 AM 10:30



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

January 20, 2015

PAULA VALIENTE  
12445 NW 27 AVENUE #302  
MIAMI, FL 33167

SUBJECT: MISSION EVANGELICA INT'L AMAD CO.  
Ref. Number: W15000003885

We have received your document for MISSION EVANGELICA INT'L AMAD CO. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name must contain a word that will clearly indicate that it is a corporation. This word 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.

The incorporator needs to sign.,

Please return the corrected 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) 245-6052.

Tyrone Scott  
Regulatory Specialist II  
New Filings Section

Letter Number: 315A00001122

## COVER LETTER

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

SUBJECT: **MISSION EVANGELICA INT'L AMAD CO. INC.**  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is 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

**ADDITIONAL COPY REQUIRED**

FROM: **PAULA VALIENTE**

Name (Printed or typed)

**12445 NW 27 AVENUE #302**

Address

**MIAMI, FL. 33167**

City, State & Zip

**786-923-6693**

Daytime Telephone number

**CHEILACASTILLA@YAHOO.COM**

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

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

**ARTICLES OF INCORPORATION**  
In compliance with Chapter 617, F.S., (Not for Profit)

**ARTICLE I    NAME**

The name of the corporation shall be: MISSION EVANGELICA INT'L AMAD CO. INC.

**ARTICLE II    PRINCIPAL OFFICE**

Principal street address:  
12445 NW 27 AVENUE #302  
MIAMI, FL. 33167

Mailing address, if different is:

**ARTICLE III    PURPOSE**

The purpose for which the corporation is organized is: CHARITIES AND NONPROFITS

**ARTICLE IV    MANNER OF ELECTION**

The manner in which the directors are elected and appointed: ELECTION YEARLY

**ARTICLE V    INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: PAULA VALIENTE-PRES  
Address: 12445 NW 27 AVE #302  
MIAMI, FL. 33167

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: CHEILA MAYENI SEC.  
Address: 9674 N.W. 10 AVENUE #LOTE G-735  
MIAMI, FL. 33150

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Address: \_\_\_\_\_

15 FEB - 2 AM 10:30

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: PAULA VALIENTE

Address: 12445 NW 27 AVE #302  
MIAMI, FL. 33167

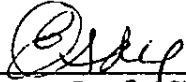
**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: PAULA VALIENTE

Address: 12445 NW 27 AVE #302  
MIAMI, FL. 33167

*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*



\_\_\_\_\_  
Required Signature of Registered Agent

01/10/2015

\_\_\_\_\_  
Date

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



\_\_\_\_\_  
Required Signature of Incorporator

\_\_\_\_\_  
Date

15 FEB - 2 AM 10:30