

A 24000072647

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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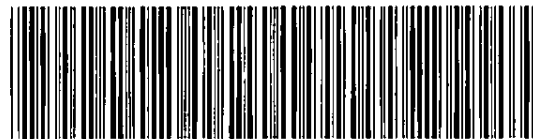
(Business Entity Name)

(Document Number)

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**CORPORATE  
ACCESS,  
INC.**

*When you need ACCESS to the world*

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236 East 6th Avenue, Tallahassee, Florida 32303  
P.O. Box 37066 (32315-7066) (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

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**WALK IN**

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CERTIFIED COPY \_\_\_\_\_

XX PHOTOCOPY \_\_\_\_\_

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XX FILING INC \_\_\_\_\_

1. MINISTERIOS FUNDAMENTO SOLIDO, INC.  
(CORPORATE NAME AND DOCUMENT #)

2. \_\_\_\_\_  
(CORPORATE NAME AND DOCUMENT #)

3. \_\_\_\_\_  
(CORPORATE NAME AND DOCUMENT #)

4. \_\_\_\_\_  
(CORPORATE NAME AND DOCUMENT #)

5. \_\_\_\_\_  
(CORPORATE NAME AND DOCUMENT #)

6. \_\_\_\_\_  
(CORPORATE NAME AND DOCUMENT #)

SPECIAL INSTRUCTIONS: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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

**ARTICLE I NAME**

The name of the corporation shall be: MINISTERIOS FUNDAMENTO SOLIDO, INC.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address:  
2500 JUNIPER DR #101

DELRAY BEACH, FL 33445

Mailing address, if different is:  
2500 JUNIPER DR #101

DELRAY BEACH, FL 33445

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: \_\_\_\_\_

THIS CORPORATION IS BEING ESTABLISHED AS AN INTERNATIONAL CHRISTIAN MINISTRY TO SPREAD THE  
GOSPEL OF JESUS CHRIST AS WELL AS TO PROVIDE CHRISTIAN EDUCATION ON A GLOBAL LEVEL.

THE NON-PROFIT WILL ALSO SERVE THE COMMUNITY IN NEED BY PROVIDING SUPPORT AS NEEDED.

**ARTICLE IV MANNER OF ELECTION** The manner in which the directors are elected and appointed: MAJORITY VOTE

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

Name and Title: INDIRA J. WELCH, PRESIDENT Name and Title: \_\_\_\_\_

Address 2500 JUNIPER DR #101 Address: \_\_\_\_\_  
DELRAY BEACH, FL 33445

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

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

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

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

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_  
 Address \_\_\_\_\_ Address: \_\_\_\_\_  
 \_\_\_\_\_  
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 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: INDIRA J WELCH  
 Address: 2500 JUNIIPER DR #101  
DELRAY BEACH, FL 33445

**ARTICLE VII INCORPORATOR**

The **name and address** of the Incorporator is:

Name: INDIRA J WELCH  
 Address: 2500 JUNIPER DR #101  
DELRAY BEACH, FL 33445

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**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: \_\_\_\_\_ (OPTIONAL)

**(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)**

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

*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*

/s/INDIRA J WELCH

12/4/2024

Required Signature of Registered Agent

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.*

/s/INDIRA J. WELCH

12/4/2024

Required Signature of Incorporator

Date