N99000004332

| Company Name JEPONES M | MISTRY INC. | | |
|-----------------------------------|-----------------------------------|-----------------------|------------------------|
| Street Address 1801 DAVIE BLVD. | Sulte/Office Numbor | | |
| FORT LAX INFROAT Zip Code Phone N | | Office Use Only | |
| CORPORATION N | NAME(S) & DOCUMENT NUM | IBER(S), (if known): | |
| 1. <u>(Corp</u> c | oration Name) (D | ocument #) | |
| 2(<u>Corp</u> c | oration Name) (D | ocument #) | |
| 3. <u>(Corpo</u> | oration Name) (D | ocument#) | 99 JUL SECRE |
| 4. <u>(Corpo</u> | oration Name) (D | ocument #) | |
| ☐ Walk in ☐ | Pick up time | Certified Copy | AM 9: 24 Of State |
| Mail out | Will wait Photocopy | Certificate of Status | DE 4 |
| NEW FILINGS | AMENDMENTS | 4000,02 | 9299647 /3301049008 |
| Profit | Amendment | | 31.25 *****87.50 |
| NonProfit | Resignation of R.A., Officer/Dire | ector | |
| Limited Liability | Change of Registered Agent | | |
| Domestication | Dissolution/Withdrawal | | |
| Other | Merger | | |
| | | | |
| OTHER FILINGS' | REGISTRATION/ | | |
| Annual Report | - QUALIFICATION | | |
| Fictitious Name | Foreign | | |
| Name Reservation | Limited Partnership | | |
| | Reinstatement | | |
| | Trademark | | |
| | Other | | |

Examiner's Initials 757/21/95

ARTICLES OF INCORPORATION OF

| | ANNA R. KING COMMUNITY DEVELOPMENT, INC. | | | | |
|--------------|--|--|--|--|--|
| ONE: | The name and address of this principal corporation is ANNA R. KING COMMUNITY DEVELOPMENT, INC. 18181 N.E. 31ST CT. AVENTURA, FL. 33160 APT. 2407 in DADE County. The corporation is organized pursuant to the FLORIDA Nonprofit Corporation Code. | | | | |
| TWO: | This corporation is a non-profit Public Benefit Corporation and is organized to aid mankind through Economic and Community Development Programs. The corporation is organized under the Non-profit Public Benefit Corporation Laws. The programs will consist of Economic Development Programs, but shall not be limited to: Homelessness, Health Care, Child Care, Youth At High Risk, Tutorial, Land Acquisition, Housing Job Training, Counseling, Employment, and other support programs to aid those in need. | | | | |
| THREE: | The duration of this corporation shall be perpetual, no stock and shall have no members. | | | | |
| FOUR: | The address of the Registered Office is: 18181 N.E. 31ST CT. AVENTURA, FL. 33160 APT. 2407 and the name and address of the registred agent of the corporation shall be: ANNA R. KING 18181 N.E. 31ST CT. APT. 2407 AVENTURA, FL. 33160 | | | | |
| FIVE: (a) | This corporation is organized and operateed exclusively for relious purposes within meaning of Section 501 (C) (3) of the Internal Revenue Code. | | | | |
| (b) | Not-withstanding any other provision of these Articles, the corporation shall not carry on any other activities not permitted to carry on (1) by a corporation exempt from federal income tax under Section 501(c) (3) of the Internal Revenue Code or (2) by a corporation contributions to which are deductible under Section 170(c)(2) of the Internal Revenue Code. | | | | |

SIX:

NIABATT

The Directors are elected in accordance with the Bylaws. the name and address of the persons appointed to act as the initial Directors of this corporation are:

| NAME | ADDRESS |
|-----------------------|---|
| ANNA R. KING | 18181 N.E. 31ST CT. APT. 2407 |
| PRESIDENT | AVENTURA, FL. 33160 |
| ETHEL DAVIS TREASURER | 4210 S.W. 26TH ST. HOLLYWOOD, FL. 33023 |
| IVAN WILLIAMS | 4210 S.W. 26TH ST. HOLLYWOOD, FL. 33023 |
| SECRETARY | |
| * | <u> </u> |
| | |
| | |

SEVEN:

The duration of this corporation shall be perpetual, and shall have no stock or members. (b) The property of this corporation is irrevocably dedicated to Public Benenfit purposes and no part of the net income or assets of the organization shall ever inure to the benefit of any director, officer, or member thereof, or the benefit of any private person.

EIGHT:

On the dissolution or windind up of the corporation, its assets remaining after payments of, or provisision for payment of, all debts and liabilities of this corporation, shall be distributed to a non-profit fund, foundation, or corporation, which is organized and operated exclusively for Public Benefit or Religious, under Section 501 (c)(3) of the Internal Revenue Code, or corresponding section of any future federal tax code, or shall be distributed to the federal government, or to a state or local government for a public purpose. Any such assets not disposed of shall be disposed of by the Court of Common Pleas of the County in which the pricipal office or organization as said Court shall determine which are organized and operated exclusively such purposes.

| NINE: | Executed on JUNE 19, 1999 The name and address of the |
|-------|---|
| | incorporator of this corporation shall be |
| | (Signature) |
| | ANNA R. KING O |
| | 18181 N.E. 31ST CT. APT. 2407 |
| | AVENTURA, FL. 33160 |

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/ REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 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: | | | | | |
|--|--------------------|----------|--|--|--|
| ANNA R. KING COMM. DEV., INC. | a ' | | | | |
| (MUST INCLUDE SUFFIX) | | | | | |
| 2. THE NAME AND ADDRESS OF THE REGISTERED AGENT AND OFFICE IS: | | | | | |
| ANNA R. KING | ာ ပ ြား | | | | |
| (NAME) | ~ | | | | |
| 18181 N.E. 31ST CT. | OF ST | . 0 | | | |
| (P.O. BOX OR MAIL DROP NOT ACCEPTABLE) | Z | | | | |
| (P.O. BOX OR MAIL DROP NOT ACCEPTABLE) AVENTURA, FL. \$3160 | 1 2 2 A | <u>.</u> | | | |
| (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)

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