	A.	II: Carolyn	Batten	
Department of State Division of Corporation P. O. Box 6327 Tallahassee, FL 32314			100302791 -10/28/9901053 ******78.75 ***	3001
Please note c	orrect name in St	anish:	1	
subject: M	UJERES LATION (Proposed corpora	NAS LMDUIS ate name - must include suffi		
translation:	Latin Women	Empowerin	ng Latin	Women, Inc
Enclosed is an original	and one(1) copy of the article	s of incorporation and a	check for:	
Filing Fee	D\$78.75 Filing Fee & Certificate of Status - already Swamilfed.	72578.75 Filing Fee & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED	
FROM:	Ileana aria Name (Pr	S (or Mappinted or typed)	by Salceds	(a) P
	18459 Pine	es Blud. S	Suite 342	11 D
	Pembroke Pi	Nes F	33029	 -
	(954) 443-7 Daytime Te	898 (plea.	se ask For Ite	eana aRias

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



## FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

October 29, 1999

MAPPY SALCEDO 18459 PINES BLVD.,STE.342 PEMBROKE PINES, FL 33029

SUBJECT: MUJERES LATINAS IPULSANDO MUJERES LATINAS. INC.

Ref. Number: W99000024979

We have received your document for MUJERES LATINAS IPULSANDO MUJERES LATINAS, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with an address and telephone number where you can be reached during working hours.

Please provide an English translation for the entity's name in your cover letter.

The purpose contained in your articles of incorporation should be more specific. Please correct your articles to reflect the specific purpose for which the corporation is being organized.

You must list at least one incorporator with a complete business street address.

Please return the 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) 487-6930.

Carolyn Batten Document Specialist

Letter Number: 699A00052043

### ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Not for Profit Corporation Act, hereby adopt(s) the following Articles of Incorporation:

	Not for From Corporation Act, hereby anopasy me following remembers of messpectation
	ARTICLE I NAME  The name of the corporation shall be:
	MUJERES LATINAS IMPULSANDO MUJERES LATIN
	ARTICLE II PRINCIPAL OFFICE  The principal place of business and mailing address of this corporation shall be:
	18459 Pines Blud. Suite 342
	Pembroke Pines, Fl. 33029
	ARTICLE III PURPOSÉ(S)
	The specific purpose(s) for which the corporation is organized is(are):
	All Lawful activities and business. Charlety
	All Lawful activities and Susiness. Charity propans And endeavors. Provide support To the community. So
¥	ARTICLE IV MANNER OF ELECTION OF DIRECTORS
•	The manner in which the directors are elected or appointed is:  At the First meeting of members will be reatified. The Manner of
	AT the first meeting of members will be kulling the manner
•	election are as stated in the bylaws.
	ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS
	The name and Florida street address of the initial registered agent are:
	MAPPY SAICEDO
	18459 Pines Blvd. Suite 342
	Pembroke Pines Fl. 33029
	ARTICLE VI JNCORPORATOR
	The name and address of the Incorporator to these Articles of Incorporation are:
	MAPPY   Salcedo. 18459 Pines Blvd. Suite 342 Pembroke Pines, Fl 33029
	( Secure 10/26/99
	/Signature/Incorporator Date
<i>50</i>	and of Directors and officers are Listed in the attachment.
	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/Registered Agen

## "A"

# Board OF Directors

"MUJERES LATINAS IMPUlsando Mujeres LATINAS, Inc

Mappy Salcedo, Director and President
Maria de Los Angeles Villar, Director and Vice-President
Maria Antonieta Díaz, Director and Secretary
Zoraida EDDE, Director and Treasurer

Tamy Cohen FURMAN, Director and Coordinator Sandra DEL VALLE, Director and Coordinator

Regina, Ravachi, Deputy Director

Ingrid Trujant, Deputy Director

Maria antonieta Penaherrera, Deputy Director

Jackeline Rotenberg, Deputy Director

Laura Cabrera, Deputy Director

Sonia abasalo, Deputy Director

address of The Directors and Offices 35 & 18459 Pines Blud. Suite 342 Free Pines, Blud. Florida 33029