

**CORPORATE
ACCESS,
INC.**

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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FILING

Articles

1.)

Rainbow of Nations, Inc.
(CORPORATE NAME & DOCUMENT #)

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-05/26/99--01088--018

*****70.00 *****70.00

2.)

(CORPORATE NAME & DOCUMENT #)

3.)

(CORPORATE NAME & DOCUMENT #)

4.)

(CORPORATE NAME & DOCUMENT #)

5.)

(CORPORATE NAME & DOCUMENT #)

SPECIAL INSTRUCTIONS

FILED
99 JUN 15 PM 12:04
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED
99 MAY 26 PM 2:29
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

June 14, 1999

CORPORATE ACCESS, INC.

SUBJECT: RAINBOW OF NATIONS, INC
Ref. Number: W99000012330

Corrected
6/15/99
[Signature]

We have received your document for RAINBOW OF NATIONS, INC and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 617.0202(d), Florida Statutes, requires the manner in which directors are elected or appointed be contained in the articles of incorporation or a statement that the method of election of directors is as stated in the bylaws.

PLEASE PRINT OR TYPE THE NAME OF THE INCORPORATOR IN ARTICLE VI.

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) 487-6928.

Michelle Milligan
Document Specialist

Letter Number: 299A00029061

RECEIVED
99 JUN 15 AM 9:18
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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 Article of Incorporation:

ARTICLE 1 NAME

The name of the corporation shall be:

RAINBOW OF NATIONS, INC.

CROSS REFERENCE SPANISH TRANSLATION: ARCOIRIS DE NACIONES, INC.

ARTICLE 11 PRINCIPAL OFFICE

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

16810 North East. 4th Court. North Miami Beach, Florida. 33162

MAILING ADDRESS: P.O. BOX 640172 MIAMI, FLORIDA 33164-0172

ARTICLE 111 PURPOSE(S)

The specific purpose(s) for which the corporation is organized is (are) **The purposes :** This Org. was designed and prepared to meet the needs of the Latin American Community in general in the field of Art, Music, Culture and Theater. Also, to support Youth who are without orientation and Family support for those interests, and create supporting group to woman promoting literary "Encounter", and committees of personalities, who wanted to discuss family and community matters. Including, Participation in Economical Developments, conventions, Seminars, training, and workshops. Moreover to work with others groups. **The Objective :** We intent to obtain a building to House the above criteria. **The Goals** of this Org. is a five years projected program needed of an Institute finite objective.

ARTICLE 1V MANNER OF ELECTION OF DIRECTORS

The manner in which the directors are elected or appointed it

BY A MAJORITY VOTE AT AN ANNUAL MEETING OF MEMBERS

ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

CECILIA SALCEDO

16810 Northeast. 4th Court. North Miami Beach, Florida 33162

ARTICLE VI INCORPORATE

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

P.O.BOX 654534, MIAMI, FLORIDA 33265

Peter E. Nefsky
Signature/Incorporator

PETER E. NEFSKY

(An additional article must be added if an effective date is requested.)

6-8-99
Date

Having been named as registered agent and to accept service of process for the above state corporation at the place Designed 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.

Cecilia Salcedo
Signature/Registered Agent

6-8-99
Date

FILED
99 JUN 15 PM 12:04
SECRETARY OF STATE
TALLAHASSEE, FLORIDA