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TRANSMITTAL LETTER

TO: Qualification/Registration Section
Division of Corporations

SUBJECT: INTERFAITH MULTICULTURAL SERVICE CENTER, INC.
(Name of Corporation)

Dear Sir or Madam:

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*****78.75 *****78.75

The enclosed "Application by Foreign Not for Profit Corporation for Authorization to Conduct its Affairs in Florida", "Certificate of Existence", and check are submitted to register the above referenced not for profit corporation to conducts its affairs in Florida.

Please return all correspondence concerning this matter to the following:

REV. PATRICK E. THOMPSON

(Name of Person)

INTERFAITH MULTICULTURAL SERVICE CENTER, INC.

(Firm/Company)

2224 NE 11th Avenue

(Address)

WILTON MANORS, FLOIRDA 33305

(City, State and Zip Code)

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TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

PATRICK E. THOMPSON
(Name of Person)

at (954) 748 - 8626
Area Code & Daytime Telephone Number

STREET ADDRESS:
Qualification/Tax Lien Section
Division of Corporations
409 E. Gaines St.
Tallahassee, FL 32399

MAILING ADDRESS:
Qualification/Tax Lien Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

- ☐ \$70.00 Filing Fee ☒ \$78.75 Filing Fee & Certificate of Status ☐ \$78.75 Filing Fee & Certified Copy ☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy
- with 10/2

**APPLICATION BY FOREIGN NOT FOR PROFIT CORPORATION FOR
AUTHORIZATION TO CONDUCT ITS AFFAIRS IN FLORIDA**

**IN COMPLIANCE WITH SECTION 617.1503, FLORIDA STATUTES, THE FOLLOWING IS
SUBMITTED TO REGISTER A FOREIGN NOT FOR PROFIT CORPORATION FOR
AUTHORIZATION TO CONDUCT ITS AFFAIRS IN THE STATE OF FLORIDA:**

1. INTERFAITH MULTICULTURAL SERVICE CENTER, INC.
(Name of corporation: must include the word "INCORPORATED" or "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present. "Company" or "Co." may not be used as a corporate suffix by a nonprofit corporation.)
2. NEW YORK 3. 11-3376303
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. APRIL 8, 1997 5. PERPETUAL
(Date of Incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. UPON QUALIFICATION
(Date corporation first conducted Affairs in Florida - See sections 617.1501, 617.1502, and 817.155, F.S.)
7. 2224 NE 11th AVENUE
WILTON MANORS, FLORIDA 33305
(Current mailing address)

8. SEE ATTACHMENT
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)

9. Name and street address of Florida registered agent:

REV, PATRICK E. THOMPSON
(Name)
7251 NW 47th PLACE, BLVD WOODS NORTH
(Office address)
LAUDERHILL, Florida, 33319
(City) (Zip Code)

10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Rev Patrick E Thompson
(Registered agent's signature)

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STATE SECRETARY OF STATE
TALLAHASSEE, FLORIDA

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and addresses of officers and/or directors: (Street address only- P. O. Box NOT acceptable)

A. DIRECTORS (Street address only- P. O. Box NOT acceptable)

Chairman: REV. PATRICK E. THOMPSON

Address: 7251 NW 47th PL. BLVD WOODS NORTH, LAUDERHILL, FL 33319

Vice Chairman: TYRONE E. SMALL / THOMPSON

Address: 7251 NW 47th PL. BLVD WOODS NORTH, LAUDERHILL, FL 33319

Director: PATRICIA A. MOHAMMED

Address: 6941 NW 45th STREET, LAUDERHILL, FL 33319

Director: WILFRED A. BROWN

Address: 6800 NW 46th COURT, LAUDERHILL, FL 33319

B. OFFICERS (Street address only- P. O. Box NOT acceptable)

President: REV. PATRICK E. THOMPSON

Address: 7251 NW 47th PL, BLVD WOODS NORTH, LAUDERHILL, FL 33319

Vice President: TYRONE E. SMALL / THOMPSON

Address: 7251 NW 47th PL, BLVD WOODS NORTH, LAUDERHILL, FL 33319

Secretary: PATRICIA A. MOHAMMED

V V Address: 6941 NW 45th STREET, LAUDERHILL, FL 33319

Treasurer: EVELYN KIRNON

Address: 4040 DUREYEA AVE. BX, N.Y. 10469

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. Rev Patrick E Thompson
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

REV. PATRICK E. THOMPSON - CHAIRMAN

(Typed or printed name and capacity of person signing application)

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ATTACHMENT

Purpose(s) of corporation

- 1) To provide housing in a general sense
- 2) To provide counseling in regards to health related services.
- 3) To provide counseling services related to immigration which is in keeping with the laws and regulations of the Immigration and Naturalization Service.
- 4) Anything to the contrary contained herein notwithstanding the corporation shall not engage or include among its purpose any of the activities mentioned in Section 404 (U) and (V) without securing prior approval from the office of Alcoholism and Substance Abuse Service.
- 5) To provide educational related services for infant school age children, youth and adults.

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OBJECTIVES

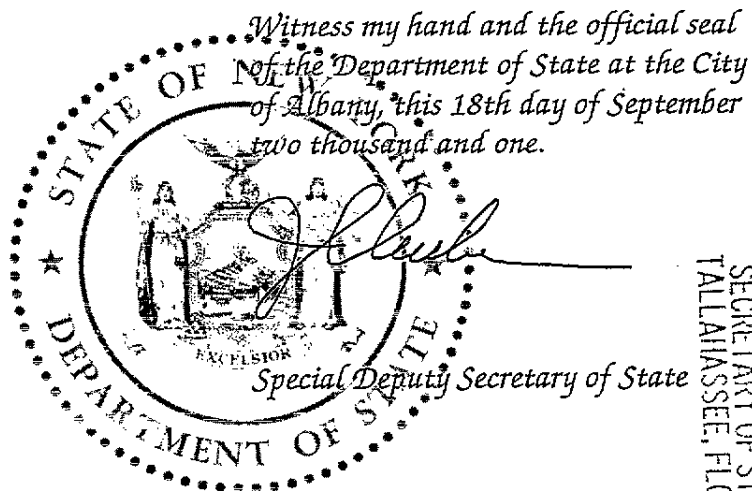
- A) To provide affordable housing for low and moderate income families; persons with AIDS; homeless persons; physical challenged persons; the Elderly and homeless Veterans.
- B) To provide counseling to persons, including welfare recipients with AIDS, Drugs and alcohol related problems; Home-care; referrals to other agencies; Volunteer ambulance services; Screening for persons without health insurance and to be able to form an HMO.
- C) To assist persons in obtaining legal status and to become citizens of the U.S.A. To provide counseling and representation at the Immigration and Naturalization Service office.
- D) To operate and maintain facilities which offer educational training, and after school tutorial programs for infants, school age children, youth and adults including seniors. Such training would include computer and other related services.

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TALLAHASSEE, FLORIDA

State of New York) ss:
Department of State

I hereby certify, that the Certificate of Incorporation of INTERFAITH MULTICULTURAL SERVICE CENTER, INC. was filed on 04/08/1997, under the name of BROOKLYN MULTICULTURAL SERVICE CENTER, INC., as a Not-for-Profit Corporation and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is a subsisting corporation.

A Certificate of Amendment BROOKLYN MULTICULTURAL SERVICE CENTER, INC., changing its name to INTERFAITH MULTICULTURAL SERVICE CENTER, INC., was filed 08/27/2001.



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