

## TRANSMITTAL LETTER

# N0000000000145

Department of State  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

SUBJECT: Central Florida Community Empowerment  
Corporation, Inc.  
(Proposed corporate name - must include suffix)

500003092275--6  
-01/10/00--01003--001  
\*\*\*\*\*560.00 \*\*\*\*\*87.50

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

☐ \$70.00  
Filing Fee

☐ \$78.75  
Filing Fee  
& Certificate of Status

☐ \$78.75  
Filing Fee  
& Certified Copy

☐ \$87.50  
Filing Fee,  
Certified Copy  
& Certificate of  
Status

**ADDITIONAL COPY REQUIRED**

FROM: Lawanna Gelzer  
Name (Printed or typed)

230 North Lakeland Ave  
Address

Orlando FL 32805  
City, State & Zip

(407) 841-7777 X 114  
Daytime Telephone number

FILED  
00 JAN - 7 PM 4: 21  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

T. SMITH JAN 0 / 2000

Central Florida Community Empowerment Corporation, Inc.  
815 Hills Alley Street  
Orlando, Florida 32805

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## ARTICLES OF INCORPORATION

The Articles of Incorporation of the undersigned, a majority of whom are citizens of the United States, desired to form a Nonprofit Corporation under the Nonprofit Corporation Law of Florida, do hereby certify:

- FIRST:** The name shall be Central Florida Community Empowerment Corporation, Inc.
- SECOND:** The location in the State where the principal office shall be deemed the registered office address of the Corporation is 230 North Lakeland Avenue, Orlando, County of Orange, Florida, 32805.
- THIRD:** Said corporation is organized exclusively for charitable, educational, religious, and scientific purposes including, for such purposes as the making of distributions to organizations that qualify as exempt organizations under section 501 © (3) of the Internal Revenue Code, or the corresponding section of any future Federal Tax Statute.
- FOURTH:** The manner in which the Directors are appointed shall be by the Trustees. The appointments shall be by mutual consent.

FILED  
00 JAN 17 PM 4:20  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**FIFTH:** The name and address of the Incorporator of corporation pursuant to Florida Statutes is as follows:

**Registered Office:** *Central Florida Community Empowerment Corporation, Inc.*

**Registered Agent:** *Lawanna Gelzer*

**Address:** *230 North Lakeland Avenue  
Orlando, FL 32805*

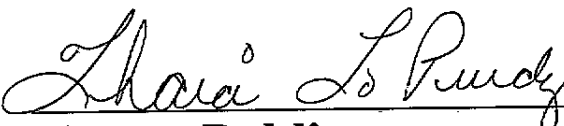
FILED  
00 JAN - 7 PM 4: 21  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

  
\_\_\_\_\_  
**Lawanna Gelzer**

*1/7/2000*  
\_\_\_\_\_  
**Date**

**Incorporator/Registered Agent**

I ACCEPT THE DESIGNATION OF REGISTERED AGENT.

  
\_\_\_\_\_  
**Notary Public**

*1/7/2000*  
\_\_\_\_\_  
**Date**

THAIA L. PURDY  
Notary Public, State of Florida  
My comm. exp. Nov. 17, 2003  
Comm. No. CC889071