8000003067378--12/13/99--01046--009

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

SUBJECT: The Caribbean Organization For Policy Advancement Inc.
(Proposed corporate name - must include suffix)

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

Filing Fee, Certified Copy

\$87.50

& Certificate

ADDITIONAL COPY REQUIRED

John W. Leon
Name (Printed or typed)

13386 SW 114 Lance

Miani, FL 33186 City, State & Zip

(305)-738-1618

Daytime Telephone number

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

JNH 305-371-6545



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

January 12, 2000

JOHN W. LEON 13386 S.W. 114 LANE MIAMI, FL 33186

SUBJECT: THE CARIBBEAN ORGANIZATION FOR POLICY ADVANCEMENT

INC.

Ref. Number: W99000028590

We have received your document for THE CARIBBEAN ORGANIZATION FOR POLICY ADVANCEMENT INC. and your check(s) totaling \$87.50. 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.

Corporations may file using only the corporate name. Please delete any reference to the "doing business as name" in your document. If you wish to register your fictitious name, you may do so by filing the enclosed application and submitting the appropriate fees to this office.

We are enclosing the proper form(s) with instructions for your convenience.

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 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) 487-6925.

Angela Howell Document Specialist

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

Letter Number: 500A00001558

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ARTICLES OF INCORPORATION

SECRETARY OF STATE TALLAHASSEE, FLORIDA

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:

ARTICLE I NAME

The name of the corporation shall be:

The Caribbean Organization for Policy Advancement, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be: 13386 SW 114th Lane, Miami, Florida 33186

ARTICLE III PURPOSE(S)

The specific purpose(s) for which the corporation is organized is(are):

The Caribbean Organization for Policy Advancement, Inc. is a non-profit, non-partisan public policy action-tank that seeks to broaden the parameters of policy debate affecting the American, Caribbean, and Latin American communities, through research and advocacy on the issues affecting these regions.

ARTICLE IV MANNER OF ELECTION OF DIRECTORS

The manner in which the directors are elected or appointed is:

As is stated in the by- laws.

ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS

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

John W. Leon 13386 SW 114th Lane, Miami, Florida 33186

ARTICLE VI INCORPORATOR

The <u>name and address</u> of the Incorporator to these Articles of Incorporation are:

John W. Leon 13386 SW 114th Lane, Miami, Florida 33186

2/20/00

Signature/Incorporator

Date

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

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 Tam familiar with and accept the obligations of my position as registered agent.

2/29/00

Signature/Incorporator

Date