

NO1000005071

TRANSMITTAL LETTER

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

500004450285--8
-06/28/01--01094--010
*****87.50 *****87.50

SUBJECT: Multi Action Community Center, 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

☒ \$87.50
Filing Fee,
Certified Copy
& Certificate

ADDITIONAL COPY REQUIRED

FROM: Wilma F. Wilcox
Name (Printed or typed)

14730 NW 10 Avenue
Address

Miami, FL. 33168
City, State & Zip

(305) 687-4588 (305) 795-2330
Daytime Telephone number

FILED
01 JUL 18 PM 3:10
SECRETARY OF STATE
TALLAHASSEE FLORIDA
110115208

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

GAVE

Wilma
AUTHORIZATION BY PHONE TO
CORRECT manner
DATE 7/18/01
DOC. EXAM Dale White



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

July 2, 2001

WILMA F. WILCOX
14730 NW 10 AVE
MIAMI, FL 33168

SUBJECT: MULTI ACTION COMMUNITY CENTER, INC.
Ref. Number: W01000015208

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.

We have received your document for MULTI ACTION COMMUNITY CENTER, 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):

The document must state the number of shares of authorized stock.

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) 245-6933.

Dale White
Document Specialist
New Filings Section

Letter Number: 701A00039480

ARTICLES OF INCORPORATION
In Compliance with Chapter 617, F.S., (Not for Profit)

FILED

01 JUL 18 PM 3:11

SECRETARY OF STATE
TALLAHASSEE FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

Multi Action Community Center, Inc.

ARTICLE II PRINCIPAL OFFICE

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

14730 NW 10 Avenue (tentative)
Miami, Florida 33168

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Mission Statement
(See attached)

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed: ARE AS STATED IN THE BYLAWS.

ARTICLE V INITIAL DIRECTORS/OFFICERS

The name and addresses: Cleveland Morley, Jr., Vice President & Treasurer
Wilma F. Wilcox, President 20300 NW 15 Avenue
14730 NW 10 Avenue Miami, Florida 33169
Miami, Florida 33168

Lori Weldon, Secretary
1351 NW 143 Street
Miami, Florida 33167

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the registered agent is:

Wilma F. Wilcox
14730 NW 10 Avenue
Miami, Florida 33168

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Wilma F. Wilcox
14730 NW 10 Avenue
Miami, Florida 33168

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity.

Wilma F. Wilcox
Signature/Registered Agent

7/11/01
Date

Wilma F. Wilcox
Signature/Incorporator

7/11/01
Date

MISSION STATEMENT

Holistic Program for Youth & Parents of Substance and Domestic Abuse.

MENTORING

- Work with youth and parents to build self-esteem and tools for self-sufficiency.
- Provide a curriculum and/or referral system for teen dropouts and single parents designed for acquisition of a G.E.D.
- Provide employability skills training.

FAMILY REUNIFICATION

- Provide family counseling on a bi-weekly basis to strengthen family ties.
- Provide parenting skill classes on a weekly basis to enhance parenting skills.
- Provide substance abuse assessment/counseling and referrals.
- Provide counseling sessions with a clinical psychologist weekly.

HEALTH SCREENING

- Facilitate medical/dental screenings through H.R.S. to assure healthy participants.
- Facilitate immunizations for children through Dade County Health Department and/or H.R.S.

DOMESTIC VIOLENCE ADVOCACY

- Provide certified counselors for victims of domestic violence.
Victims will automatically be referred to appropriate "Domestic Violence Advocate" for appropriate action and placement in shelter if necessary.

JOB REFERRALS

- Miami Dade County Community Action Agency for computer training & job placement assistance.
- Job placement assistance upon completion of program.
- The foregoing purposes and activities will be interpreted as examples only and not as limitations, and nothing therein shall be deemed as prohibiting the corporation from extending its activities to any related or otherwise permissible lawful act or business purposes which may become necessary, profitable or desirable for the furtherance of the corporate objectives expressed above under the General Cooperation Law of the State of Florida.