

# No 1000005101

Requester's Name

Address

City/State/Zip

Phone #

Anthony Washington Phone 407-296-5177

Office Use Only

NY 1612 Bear Crossing Circle

SS APOFTA State FL Zip 32703

ER(S), (if known):

Document # 000004480700-0  
-07/17/01--01055--001  
\*\*\*\*135.00 \*\*\*\*\*87.50

2. (Corporation Name) (Document #)

3. (Corporation Name) (Document #)

4. (Corporation Name) (Document #)

- ☐ Walk in ☐ Pick up time ☐ Certified Copy  
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

## NEW FILINGS

- ☐ Profit  
☐ Not for Profit  
☐ Limited Liability  
☐ Domestication  
☐ Other

## OTHER FILINGS

- ☐ Annual Report  
☐ Fictitious Name

## AMENDMENTS

- ☐ Amendment  
☐ Resignation of R.A., Officer/Director  
☐ Change of Registered Agent  
☐ Dissolution/Withdrawal  
☐ Merger

## REGISTRATION/QUALIFICATION

- ☐ Foreign  
☐ Limited Partnership  
☐ Reinstatement  
☐ Trademark  
☐ Other

FILED  
2001 JUL 17 AM 11:02  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

Examiner's Initials

7/19/01

## **One Stop Men's Health, Inc.**

The undersigned pursuant to Chapter 617, Florida Statute, adopt (s) the following articles of incorporation.

### **ARTICLE I**

The name of the organization shall be: One Stop Men's Health, Inc.

### **ARTICLE II**

The principal place of business and the mailing address shall be:

1612 Bear Crossing Circle  
Apopka, Florida 32703

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### **ARTICLE III**

#### **Purposes**

The purposes of One Stop Men's Health, Inc shall be:

1. Address disparities among racial and ethnic male population through education and prevention.
2. Facilitate access to health care among racial and ethnic male populations.
3. Address HIV/AIDS, sexually transmitted diseases, cardiovascular diseases, diabetes and cancer among racial and ethnic male populations.
4. Provide substance abuse counseling.
5. Facilitate access to social services and housing.

### **ARTICLE IV**

This corporation is to exercise all rights and powers to expedite and carry out all the purposes of this corporation, and as may be determined by the Board of Directors and subject to the bylaws to possess all rights, privileges and immunities. The Board of Directors shall solicit membership rights, duties, benefits and obligations will be set forth in the bylaws. Special membership will be set forth in the bylaws.

#### **ARTICLE V**

##### **Non-Profit Status**

This corporation is organized under a non-profit basis. No member shall be entitled to or receive monetary compensation or share of corporate asset. Corporation officers and/or Directors may be compensated as set forth in the bylaws.

#### **ARTICLE VI**

##### **Terms of Existence**

This corporation not for profit shall have perpetual existence.

#### **ARTICLE VII**

##### **Registered Resident Agent**

The name of the registered agent of this corporation at the registered office of this Corporation shall be:

Anthony J. Washington  
1612 Bear Crossing Circle  
Apopka, Florida 32703

#### **ARTICLE VIII**

##### **Incorporator**

The name of the incorporator(s) for the corporation is:

Anthony J Washington  
1612 Bear Crossing Circle  
Apopka, Florida 32703

**ARTICLE IX**  
Initial Board of Directors

The initial Board of Directors will be appointed by the incorporators and shall remain in Office until the first annual meeting of which time new elections will take place. The manner in which they will be elected shall be set forth in bylaws.

Anthony J. Washington  
1612 Bear Crossing Circle  
Apopka, Florida 32703

Barbara P. Carroll  
6533 Pomeroy Circle  
Orlando, Florida 32801

Eugene Smith  
3431 W. Church Street  
Orlando, Florida 32805

The initial Board of Directors shall have the power to make, alter or rescind all such Bylaws and regulations to rule the business of the corporation as will not Consistent with these articles, or of the laws of the state of Florida. The number of directors may be raised or lowered by amendment of the bylaws, but shall in no case be less than three.

**ARTICLE X**

Dissolution

In the event of dissolution, the residual assets of the organization shall be distributed to one or more organizations organized and qualified charitable, educational, scientific or Philanthropic organizations to be selected by the Board of Directors as defined in IRS section 501 c (3).

## ARTICLE XI

### Officers

The officers of the corporation shall consist of a President, Vice President and Secretary. Other officers may be provided in the bylaws. The Board shall elect each officer of Directors at such time and in such manner as may be prescribed by the bylaws. Their duties shall be set forth in the bylaws and responsibilities.

## ARTICLE XII

### Amendments

Amendments to the bylaws shall be set forth in the Florida Law or Corporate bylaws.

## ARTICLE XIII

Any provisions in these articles of corporation that is contrary of Chapter 617 Florida Statute shall be void. The voiding of that provision shall not act to void any of the provision of the articles.

The undersigned incorporator(s) has (have) executed these Articles of Incorporation this 10<sup>th</sup> day of July, 2001.

Signature(s) of the Incorporator(s)

Anthony J. Washington

Anthony J. Washington

\_\_\_\_\_  
Typed name of incorporator signing

## CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of section 607.0501 or 617.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered Agent, in the State of Florida.

1. The name of the corporation is One Stop Men's Health, INC.
2. The name and address of the registered agent and office is:

ANTHONY J. WASHINGTON

NAME

1612 BEAR CROSSING Circle

ADDRESS (P.O. BOX NOT ACCEPTABLE)

APOPKA, Florida 32703

(CITY/STATE/ZIP)

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS REGSITERED 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 A FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

SIGNATURE

DATE

Anthony J. Washington  
July 10, 2001

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SECRETARY OF STATE  
TALLAHASSEE FLORIDA

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