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TRANSMITTAL LETTER

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

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TITLE-I ELEMENTARY AND SECONDARY SUBJECT: <u>EOUCATION ACT(ESEA) PARENT COUNCIL</u> OF F (PROPOSED CORPORATE NAME-<u>MUST INCLUDE SUFFIX</u>) SUFFIX) INC

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

**\$70.00** Filing Fee

S78.75 Filing Fee & Certificate of Status □\$78.75 Filing Fee & Certified Copy Filing Fee, Certified Copy & Certificate

ADDITIONAL COPY REQUIRED

FROM: KENT POLLO(K Name (Printed or typed)

2171 NW 47TH TERR Address

*M19m1, FL* 33142 City, State & Zip

<u>305-389-8231</u> Daytime Telephone number 954-963-7708

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



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Service or or art

FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

March 16, 2005

KENT POLLOCK 2171 NW 47TH TERR MIAMI, FL 33142

SUBJECT: TITLE 1 ELEMENTARY AND SECONDARY EDUCATION ACT(ESA) PARENT COUNCIL OF FLORIDA INC. Ref. Number: W05000013732

We have received your document for TITLE 1 ELEMENTARY AND SECONDARY EDUCATION ACT(ESA) PARENT COUNCIL OF FLORIDA 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):

Entities may file using only the entity's 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.

Please remove (ESEA) from your corporations name.

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) 245-6928.

Tim Burch Document Specialist New Filings Section

Letter Number: 705A00018124

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

## ARTICLES OF INCORPORATION

ARTICLE - I NAME The name of the corporation shall be: Title 1 Elementary And Secondary Education Act Parent Council Of Florida Inc.

ARTICLE - II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be : 2171 North West 47<sup>th</sup> Terrace Miami, Florida 33142

## **ARTICLE - III PURPOSE**

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The purpose for which the corporation is organized is : To provide information, training and support to Parents of Title 1 Students within the state.

## **ARTICLE - IV MANNER OF ELECTION**

The manner in which the directors are elected or appointed : Board Of Directors shall be elected by the general membership at their Annual Meeting to serve a 3 Year Term.

ARTICLE - V INITIAL DIRECTORS / OFFICERS	
Kent Pollock - Director	Martha Ross - Director
12750 N. W. 27 <sup>th</sup> Avenue # 57	1376 N. W. 71st Street
Opa-Locka , Florida 33054	Miami , Florida 33147

Ana Madriz - Director 14257 S. W. 177<sup>th</sup> Terrace Miami , Florida 33177 Glen Cuttler - Director 1801 S. W. 82<sup>nd</sup> Place Miami, Florida 33155 FILED 05 MAR 28 AM 7: 54

Sherelean Edwards - Director 600 Ahmad Street Opa-Locka , Florida 33054

Elizabeth Tejeda - Director 1111 West 37<sup>th</sup> Street Hialeah , Florida 33012

Maria Remedio - Director 4660 East 8<sup>th</sup> Lane Hialeah, Florida 33013 Ethel Pruitt - Director 8400 N. W. 10<sup>th</sup> Avenue Miami, Florida 33150

Connie Johnson - Director 3753 Washington Street Miami , Florida 33133

Ethel Baker - Director 2530 West 10<sup>th</sup> Avenue Hialeah , Florida 33010

Latonia Burnett - Robinson - Director 3616 N. W. 189<sup>th</sup> Street Carol City, Florida 33056

Marjorie Murillo - Director 26604 S. W. 122<sup>nd</sup> Place Miami, Florida 33177

Irlande Cole - Director 731 N. E. 161<sup>st</sup> Street North Miami Beach , Florida 33162

ARTICLE - VI INITIAL REGISTERED AGENT AND STREET ADDRESS The name and Florida street address of the registered agent is : Kent Pollock 12750 N. W. 27<sup>th</sup> Avenue # 57 Opa-Locka, Florida 33054

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## **ARTICLE VII - INCORPORATOR**

The name and address of the incorporator is : Kent Pollock 12750 N. W. 27th Avenue # 57 Opa-Locka, Florida 33054

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.

Signature / Registered Agent

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Signature / Incorporator

3/1/5

Date

3/1/5

Date