

NO5000006658

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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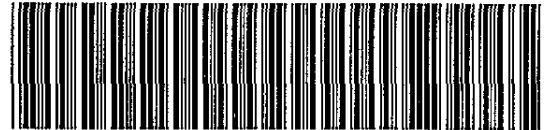
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

05 JUN 28 PM 2:03

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TRANSMITTAL LETTER

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

SUBJECT: Family Support & Training 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: Josefina Perez Castro

Name (Printed or typed)

7344 SW 48th Street, Suite # 302

Address

Miami, FL 33155

City, State & Zip

305-663-0013

Daytime Telephone number

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

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

ARTICLE I NAME

The name of the corporation shall be:

Family Support & Training Center, Inc.

ARTICLE II PRINCIPAL OFFICE

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

7344 SW 48th Street, Suite #302
Miami, FL 33155

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

The primary purpose is exclusively charitable and educational within the meaning of Section 501(c)(3) of the IRS; to provide education, training, and support to individuals and families, by offering counseling, support groups, workshops, and parent training.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:

Members of the Board will be selected based on competence, bridge to constituencies, community leadership, and shared goals, and be elected or appointed by vote.

ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS

List name(s), address(es) and specific title(s):

Josefina Perez Castro, LCSW- Director
7344 SW 48th Street, #302 Miami, FL 33155
Lisa Lewis Arango, Ph.D.- Director
7344 SW 48th Street, #302 Miami, FL 33155
Maria Elena Manrique- Officer
7344 SW 48th Street, #302 Miami, FL 33155

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Josefina Perez Castro, LCSW- Director
7344 SW 48th Street, #302 Miami, FL 33155

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Lisa Lewis Arango, Ph.D.- Director
7344 SW 48th Street, #302 Miami, FL 33155

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

Josefina Perez Castro

Date

6/23/05

Signature/Incorporator

Lisa L. Arango

Date

6/23/05

FILED

05 JUN 28 PM 2:04

SECRETARY OF STATE
TALLAHASSEE, FLORIDA