# 

(Re	equestor's Name)			
(Address)				
(Ad	ldress)	•		
(0)	101-1-101-101-1	- 10		
(Ci	ty/State/Zip/Phon	e #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				
Special menutations to 1 ming emisor.				

Office Use Only



000108094990

08/20/07--01033--007 \*\*78.75

07 AUG 20 PM 2: 50
SECRETARY OF STATE
TAIL AHASSEE, FLORID

MPJ)

#### **COVER LETTER**

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

SUBJECT: FIRST CARE FOUNDATION, INC.				
	(PROPOSED CORPORATI	E NAME – <u>MUST INCLU</u>	<u>DE SUFFIX</u> )	
Particulation out that	d. (1) Cal. A 4' 1	CI	ht- C	
Enclosed is an original ar	nd one(1) copy of the Articl	es of incorporation and	a cneck for:	
\$70.00	<b>\$78.75</b>	<b>[√]</b> \$78.75	□ \$87.50	
Filing Fee	Filing Fee &	Filing Fee	Filing Fee,	
	Certificate of	& Certified Copy	Certified Copy	
	Status		& Certificate	
		ADDITIONAL CO	PY REOUIRED	
FIRST CARE FOUNDATION INC				
FROM: FIRST CARE FOUNDATION, INC.  Name (Printed or typed)			_	
(				
2040 NE 163rd Street, #303				
Address				
	N. Miami Beach, Florida 33162  City, State & Zip			
City, State & Zip				
	(305) 945-9025			
Daytime Telephone number			_	

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

#### Articles of Incorporation For

07 AUG 20 PH 2: 50

FIRST CARE FOUNDATION, INC.

SECRETARY OF STATE TALLAHASSEE, FLORIDA

ONE:

The name and address of this principal corporation is FIRST CARE FOUNDATION, INC. at 2040 NE 163rd Street, #303, N. Miami Beach, Florida 33162, Dade County. The Corporation is organized pursuant to the FLORIDA Non-profit Corporation Code.

Two:

The purpose or purposes for which the corporation is formed are as follows: to aid those in need towards a life of self-sufficiency. The programs will consist of: Providing Respite Care to the Elderly, Disabled and Single Parents, Nursing Care, Education, Advocacy, Referrals, Seminars and Workshops, Food and Clothing Assistance, and Missions.

THREE:

The duration of this Corporation shall be perpetual, with no stock and shall have no

members.

FOUR:

The address of the registered office is 5243 Alton Road, Miami Beach, Florida, 33140 and the name of the Registered Agent of the Corporation shall be:

Lisia McLean

- FIVE: (1) This Corporation is organized and operated exclusively for Educational and Charitable purposes within the meaning of Section 501 (c) (3) of the Internal Revenue Code.
  - Not-withstanding any other provision of these Articles, the Corporation shall not **(2)** carry on any other activities not permitted to carry on (1) by a corporation exempt from federal income tax under Section 501 (c) (3) of the Internal Revenue Code or (2) by corporation contributions to which are deductible under Section 170 (c) (2) of the Internal Revenue Code.

SIX:

The Directors are elected in accordance with the By-laws. The name and address of the persons appointed to act as the initial Directors of this Corporation are:

•	<u>Names</u>	<u>Addresses</u>
President	LISIA MCLEAN	5243 Alton Road
		Miami Beach, Florida 33140
Vice President	CLAUDIA MCLEAN	2040 NE 163 <sup>rd</sup> Street, #303
		Miami, Florida 33162
Treasurer	ZULA GRAHAM	7601 East Treasure Drive, Apt #503
		Normandy Isles, FL 33141
Secretary	DIANA MCLEAN	4650 Alton Road
	_	Miami Beach, FL 33140

SEVEN:

The property of this Corporation is irrevocably dedicated to Charitable and Education purposes and no part of the net income or assets of the organization shall ever inure to the benefit of any director, officer or member thereof or the benefit of any private person.

EIGHT:

On the dissolution or winding up of the Corporation, its assets remaining after payment of, or provision for payment of, all debts, and liabilities of this Corporation, shall be distributed to a non-profit fund, foundation, or corporation, which is organized and operated exclusively for, Education and Charitable under Section 501 (c) (3) of the Internal Revenue Code, or corresponding section of any future federal tax code, or shall be distributed to the federal government, or to a state or local government for a public purpose. Any such assets not disposed of shall be disposed of by the Court of Common Pleas of the county in which the principal office of the organization is located, exclusive for such purposes or to such organization or organizations, as said Court shall determine which are organized and operated exclusively for such purposes.

NINE:

Executed on August 13, 2007. The name and address of the incorporator of this Corporation shall be:

Lisia McLean 5243 Alton Road

Miami Beach, Florida 33140

### FILED

07 AUG 20 PM 2: 50

## CERTIFICATE OF DESIGNATION OF SECRETARY OF STATE TALLAHASSEE. FLORIBA REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, 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.

The name of the corporation is:

FIRST CARE FOUNDATION, INC.

The name and address of the registered agent and office is:

<u>Lisia McLean</u> 5243 Alton Road Miami Beach, Florida 33140

The above person has been named as registered agent and to accept service of process for the stated purpose of preparation 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, completely, to the proper and complete performance of my duties, and I am familiar with and accept the directions of my position as registered agent.

(SIGNATURE)