# N09000009457

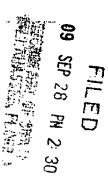
| (Requestor's Name)                      |  |  |  |  |
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| (Address)                               |  |  |  |  |
| (1888-888)                              |  |  |  |  |
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| (Address)                               |  |  |  |  |
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| (City/State/Zip/Phone #)                |  |  |  |  |
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| PICK-UP WAIT MAIL                       |  |  |  |  |
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| (Business Entity Name)                  |  |  |  |  |
|   |  |  |  |  |
| (Document Number)                       |  |  |  |  |
| (Boodiffert (William)                   |  |  |  |  |
|   |  |  |  |  |
| Certified Copies Certificates of Status |  |  |  |  |
|   |  |  |  |  |
| Constitution to Ellino Office           |  |  |  |  |
| Special Instructions to Filing Officer: |  |  |  |  |
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9-29-08

# **COVER LETTER**

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

| SUBJECT:                                     | Miami Northwestern High Class of 1972, Inc.                                |                                     |  |
|--|--|-------------------------------------|--|
|  | (PROPOSED CORPORA  | TE NAME – <u>MUST INCLU</u>         | <u>DE SUFFIX)</u>  |
| Enclosed is an original  \$70.00  Filing Fee | and one (1) copy of the Art  \$78.75  Filing Fee &  Certificate of  Status | \$78.75 Filing Fee & Certified Copy | a check for:  \$87.50 Filing Fee, Certified Copy & Certificate |
|  |  | ADDITIONAL COPY REQUIRED            |  |
| FD OM:                                       | . Clarateen  | D. Kirkland-Kent                    |  |

amethathomas@aol.com

Daytime Telephone number

Name (Printed or typed)

Miami, Florida 33127-1039 City, State & Zip

1165 NW 60 Street Address

305 323-5551

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

E-mail address: (to be used for future annual report notification)

## ARTICLES OF INCORPORATION

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

## ARTICLE I NAME

The name of the corporation shall be:

Miami Northwestern High Class of 1972, Inc.

## ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is:

1165 Northwest 60 Street

Miami, Florida 33127-1039

#### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To provide community support and services



# ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:

The class officers are elected through the voting process of the Robert Rules of Order.

# ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS

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

President: Donald Williams - P. O. Box 510535, Miami, Ft. 33151-0535

Vice-President: Charlene Joseph - 1070 NW 128 Street, North Miami, FL 33168

Secretary: Linda Harvard - 655 NW 56 Street #504, Miami, FL 33127

Treasurer: Clarateen D. Kirkland-Kent - 1165 NW 60 Street, Miami, FL 33127-1039

Vice-Treasurer: Terri Morgan-Johnson - 15121 NW 32 Avenue, Miami Gardens, FL 33054 Parliamentarian: Charles Clinch - 900 NW 180 Terrace, Miami Gardens, FL 33169

#### ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Clarateen D. Kirkland-Kent

1165 NW 60 Street

Miami, FL 33127-1039

# ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Clarateen D. Kirkland-Kent

1165 NW 60 Street

Miami, FL 33127-1039

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

Clarateen D. Kirkland-Kent

Signature/Incorporator

09/25/2009

Date

09/25/2009

Date