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Mie

# **COVER LETTER**

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

SUBJECT: University of Dreams Early Learning & Family Resource 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 :

S70.00 Filing Fee	▼\$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate
*/		ADDITIONAL COR	Y REQUIRED
		<del>"</del>	
FROM:	Kathlene Rainey-Holma	n	
		ted or typed)	
	2960 Ave H West		
	Ado	lress	
Riviera Beach, FL 33404			
	City, Sta	te & Zip	
	(561) 452-6452		
	Daytime Tele	phone number	
	rain7801@hellcouth not		·

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

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

February 9, 2010

Kathlene Rainey-Holman 2960 Ave H West Riviera Beach, FL 33404

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

Re: Corporate filing

To whom it concerns:

We have requested and received the dissolution of "University of Dreams Early Learning Family Resource Center, Inc." as a for-profit corporation. We have no intentions of revoking the dissolution. However, we need to file this corporation as a non-profit. I have enclosed the application to complete this task along with a check in the amount of \$78.75 to cover the cost of the application fees.

Thank you for your indulgence with me through this process. I am still under time restraints with a pending 501c3 application. Again, I please ask for your expedience in this matter and I cannot convey my appreciation in words.

My contact information is (561) 452-6452 or rain7891@bellsouth.net.

Kathlene Rainey-Holman, MSW

2/9/10 /Date

# ARTICLES OF INCORPORATION

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

ARTICLE I NAME
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The name of the corporation shall be:

University of Dreams Early Learning & Family Resource Center, Inc.

## ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is: 2960 Ave H West, Riviera Beach, FL 33404

#### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

We will impact neighborhoods by providing: child care for children of low-income "working" parents, parenting information & resources, on-site social service assistance for parents and community residents to access resources that will decrease the risks of child abuse, neglect and poverty.

## ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:

As provided by by-laws.

#### ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS

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

Kathlene Rainey-Holman 2980 Ave H West Riviera Beach, FL 33404

Ranada Rainey-Reese - VP 3901 36th Ct #C104 West Palm Beach, FL 33407

Melissa Jenkins-Pleme-SEC 1728 Olive Tree Circle West Palm Beach, FL 33413

### ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Kathlene Rainey-Holman 2960 Ave H West Riviera Beach, FL 33404

# ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is:

Kathlene Rainey-Holman

2960 Ave H West

Riviera Beach, Fl 33404	
**************	***********
Having been named as registered agent to accept service of proces in this qertificate, I amfamiliar with and accept the appointment a	
Kalhle Kainer Alph	2/9/10
Signature/Registered Agent	Date
Fathler Rawy Halma	2/9/10
Signature/Incorporator V	Date