# N10000003312

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Secriet Instructions to Siling Officer
Special Instructions to Filing Officer:

Office Use Only



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03/29/10--01069--014 \*\*78.75

SECRETARY OF STATE

10 MAR 31 PM 3: !





# **COVER LETTER**

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

SUBJECT:	Heads Held High Inc (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)			
Enclosed is an original  \$70.00  Filing Fee	and one (1) copy of the Artic  \$78.75  Filing Fee &  Certificate of  Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate	
		ADDITIONAL CO	PY REQUIRED	
FROM	: Willie J. Covington Name (Prin	nted or typed)	-	
	5143 N. W. 24th AVE Address			
	Miami, Florida. 33142 City, State & Zip			
	(305) 610-7816 Daytime Tele	ephone number	-	
	wcovi001@fiu.edu E-mail address: (to be used for fu	iture annual report notification	- on)	

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:

Heads Held High, Inc.

10 MAR 31 PM 3: 56

SECRETARY OF STATE TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

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

5143 N. W. 24th AVE Miami, FL, 33142

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

The organization is organized exclusively for the benefit of addicted and homeless women with or without children (12 yrs. and under) which will include drug treatment, individual counseling, random drug testing, Bio-Psycho-Social profiles, Housing, Child Care (when client is away from the facility) Transporting children to and from school, Parenting Classes, and regular attendance pf both Narcotic and Alcoholic Anonymous meetings.

### ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:

Based on experience and commitment to addictions, homelessness and child welfare.

## ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS

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

Willie J. Covington, Founder, President/CEO, 5143 N.W. 24th AVE, Miami, FL, 33142 Elijah Young, Vice-President. 2313 N.W.181 Terr. Miami Gardens, FL. 33056 Sophia Fulton, Secretary, 2539 N. W. 46th Street, Miami, FL, 33142

### ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Willie J. Covington, 5143 N. W. 24th AVE, Miami, FL. 33142

### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Willie J. Covington 5143 N. W. 24th AVE, Miami, FL. 33142

<b>₹</b>	
***************	********
Having been named as registered agent to accept service of process for the above stated	d corporation at the place designated
in this certificate, I am familiar with and accept the appointment as registered agent at	nd agree to act in this capacity.
Willie O. Boving for	03/25/20/0
Signature/Registered Agent	Date
Wille J. Covington Signature/Incorporator	03/25/20/0