

N10000003416

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

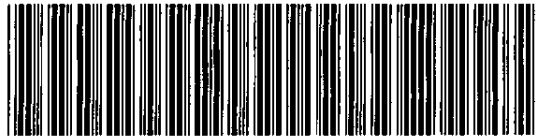
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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03/10/10--01014--014 **78.75

FILED
10 APR -5 PM 12:26
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

W1000012388

CL

4-6-10

9

COVER LETTER

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

SUBJECT: National Association of Minority Business Enterprise (NAMBE)
(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: Kelvin Crockett
Name (Printed or typed)

P.O. Box 4266
Address

Lantana, Florida 33465
City, State & Zip

561-889-1341
Daytime Telephone number

kelvincrockett@aol.com
E-mail address: (to be used for future annual report notification)

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED

10 MAR 25 PM 1:07

DIVISION OF CORPORATION

March 11, 2010

KELVIN CROCKETT
P.O. BOX 4266
LANTANA, FL 33465

SUBJECT: NATIONAL ASSOCIATION OF MINORITY BUSINESS
ENTERPRISE
Ref. Number: W10000012388

We have received your document for NATIONAL ASSOCIATION OF MINORITY BUSINESS ENTERPRISE and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name must contain a word that will clearly indicate that it is a corporation. This word may be: CORPORATION, CORP., INCORPORATED, or INC. Sections 617.0401(1)(a) and 617.1506(1), Florida Statutes, prohibits the use of the word COMPANY or CO. in the name of a non-profit corporation.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6869.

Christine Haney
Senior Clerk
New Filing Section

Letter Number: 210A00006081

Division of Corporations, P.O. BOX 6287, Tallahassee, Florida 32314



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 26, 2010

KELVIN CROCKETT **2ND REJECTION**
P.O. BOX 4266
LANTANA, FL 33465

SUBJECT: NATIONAL ASSOCIATION OF MINORITY BUSINESS
ENTERPRISE
Ref. Number: W10000012388

We have received your document for NATIONAL ASSOCIATION OF MINORITY BUSINESS ENTERPRISE and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please accept our apology for failing to mention this in our previous letter.

Entities may file using only the entity's name. Please delete any reference to the "doing business as name" in your document. If you wish to register your fictitious name, you may do so by filing an application and submitting the appropriate fees to this office.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6869.

Christine Haney
Senior Clerk
New Filing Section

Letter Number: 210A00006081

RECEIVED
10 APR -5 PM 2:17
FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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

ARTICLE I NAME

The name of the corporation shall be:

National Association of Minority Business Enterprise, Inc.

ARTICLE II PRINCIPAL OFFICE

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

3589 South Ocean Boulevard, Suite 606
Palm Beach, FL 33480

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

A trade, educational, entrepreneurship and advocacy association established to address common concerns of Minority Businesses in construction, vendors, suppliers and services.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:

The president of the organization selects the board of directors as stated in the bylaws.

ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS

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

Manuel Sanchez, President 1470 N. Congress Ave., Suite 119, West Palm Beach, FL 33409
Antonio Charlez, Vice President 5243 1st Road Lake Worth, FL 33467
Wanda Gadson, Secretary 145 NW 10th Avenue, Delray Beach, FL 33444
Gladys Keith, Treasurer 1910 NW 105 Avenue, Pembroke Pines, FL 33026

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Kelvin Crockett - 3589 South Ocean Boulevard, Suite 606, Palm Beach, FL 33480

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Kelvin Crockett - 3589 South Ocean Boulevard, Suite 606, Palm Beach, FL 33480

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.

Kelvin Crockett

Signature/Registered Agent

4/1/10
Date

Kelvin Crockett

Signature/Incorporator

4/1/10
Date