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TO THE FOR THE THE

5/15 Dl2000026989

COVER LETTER

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

SUBJECT: North Star Community Development Corporation, Inc. (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is an original	and one (1) copy of the A	rticles of Incorporation an	d 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 C	OPY REQUIRED
FROM	. Frederic	ck Taylor	

Frederick Taylor

Name (Printed or typed)

538 Meadowmist Way

Address

Odenton, MD 21113

City. State & Zip

(786) 619-5030

Daytime Telephone number

loryanho@yahoo.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

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May 15, 2012

FREDERICK TAYLOR 538 MEADOWMIST WAY ODENTON, MD 21113

SUBJECT: NORTH STAR COMMUNITY DEVELOPMENT CORPORATION,

INC.

Ref. Number: W12000026989

We have received your document for NORTH STAR COMMUNITY DEVELOPMENT CORPORATION, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

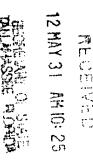
Section 617.0202(d), Florida Statutes, requires the manner in which directors are elected or appointed be contained in the articles of incorporation or a statement that the method of election of directors is as stated in the bylaws.

Please return 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) 245-6052.

Jessica A Fason Regulatory Specialist II

Letter Number: 612A00014407



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

ARTICLE I	North Star Community	Developmen	t Corporation, Inc
The name of the c	orporation shall be:		
ARTICLE II	PRINCIPAL OFFICE		
-	Principal street address		Mailing address, if different is:
	8980 S. Hollybrook Boulevard, #210 Pembroke Pines, Florida 33025	- - -	
ARTICLE III	PURPOSE		
The purpose for v	which the corporation is organized is:		
development, a ownership and	nd Purpose of North Star Community Develo and financial services that will enhance the q I first-time homebuyer programs; financial lite siness development, technical assistance ar	juality of life for eracy and credi	families and individuals through home t education; case management and
ARTICLE IV	MANNER OF ELECTION The manner in	which the director	s are elected and appointed:
The initial inc	MANNER OF ELECTION The manner in the manner	to hold the of	fices and positions listed herein.
ARTICLE V	INITIAL OFFICERS AND/OR DIRECTOR		,
	Title: Frederick Taylor, President		e: Gregory Lewis, V.P. of Marketing
Address:	538 Meadowmist Way	_ Address:	129 Nunnery Lane
	Odenton, MD 21113	_	Catonsville, MD 21228
	· · · · · · · · · · · · · · · · · · ·	_	
	Fitle:Lorenzo Howard, V.P. of Finance		e: Cyprian Reid, V.P. of Sales
Address:	8980 S. Hollybrook Boulevard, #210	_ Address:	2108 Hanson Street
	Pembroke Pines, FL 33025	-	Fort Myers, FL 33901
Nome and T	Fitle: Paul Miles, V.P. of Development	- Nowe and Title	e: Secretary, Vacant
Address:	9201 Cheltenham Drive	_ Name and Title Address:	Christopher Vincent
Addiess.	Brandywine, MD 20613	_ Addiess.	814 AVI eshual Conth
	ziariaywii.	- -	814 Allesbury Garth Arnold, MD 21012
ARTICLE VI	REGISTERED AGENT		7
	orida street address (P.O. Box NOT acceptable) of	the registered age	
Name:	Frederick Taylor	the registered tige	
Address:	- 8980 S. Hollybrook Boulevard #210		الله الله الله الله الله الله الله الله
	•		on All A
	Pembroke Pines, Florida 33025	_	A
ARTICLE VII	INCORPORATOR		
	Idress of the Incorporator is:		· · · · · · · · · · · · · · · · · · ·
Name:	Frederick Taylor		5
Address:	538 Meadowmist Way	-	
	Odenton, MD 21113	-	
		-	
Having been nan	ned as registered agent to accept service of proces	ss for the above	stated corporation at the place designated in this
	amiliar with and accept the appointment as registere		
	. 6		11 15015
Tilede	ich aufter		May 9+20/Z
•	Required Signature of Registered Agent		. Uate
I submit this docu	iment and affirm that the facts stated herein are tri	ue. I am aware tl	hat any false information submitted in a document
	t of State constitutes a t hird degree felony as provide		
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