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COVER LETTER

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Department, of State
Division of Corporations
P. O. Box 5327
Tallahasse e, FL 32314

CT:	OMEN'S ALLIANCE, INC. (PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)			
ed is an original an \$70.00 Filing Fee	d 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 CO		
FROM:	MAGUELENA ALDOPHE		_	
_	Nar	me (Printed or typed)		
1	045 NW 155TH LN STE 30		ا استان استان استان است استان استان است	
_		Address	Dhe C C to C to	

MALDOPHE@YAHOO.COM

MIAMI, FL 33169

786-587-8723

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

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

City, State & Zip

Daytime Telephone number

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April 30, 2015

MAGUELENA ALDOPHE 1045 NW 155TH LN SUITE 301 MIAMI, FL 33169

SUBJECT: ALLIANCE OF HAITIAN AMERICAN WOMEN, INC. Ref. Number: W15000029833

We have received your document for ALLIANCE OF HAITIAN AMERICAN WOMEN, 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):

Your document is being returned as requested.

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) 245-6052.

Claretha Golden Regulatory Specialist II New Filing Section

Letter Number: 315A00008936

ARTICLES OF INCORPORATION FOR

FILED 15 JUN -2 PM 5: 03

UNITED WOMEN'S ALLIANCE, INC.

THE UNDERSIGNED ACTING AS INCORPORATORS OF A CORPORATION PURSUANTION OF THE CHAPTER 617, FLORIDA STATUES, (NOT FOR PROFIT) ADOPT THE FOLLOWING ARTICLES OF INCORPORATION.

ARTICLE I- NAME

THE NAME OF THE CORPORATION SHALL BE UNITED WOMEN'S ALLIANCE, INC.

ARTICLE II- PRINCIPAL OFFICE AND MAILING ADDRESS

The principal office and mailing address of this corporation shall be:

1045 NW 155TH Ln Ste 301 Miami, FL 33169

ARTICLE III- PURPOSE

United Women's Alliance, Inc. will create and facilitate networking opportunities that will support the emerging generations of women leaders in Miami-Dade County. United Women's Alliance, Inc. will provide college students opportunities to interact with prominent professional and service groups. The students will gain exposure by shadowing and building relationships with professionals in their field of interest or major and have access to educational resources through seminars, webinars, and networking conferences. In conjunction, this organization will empower young women and teach them to embrace themselves, their culture, and community. United Women's Alliance Inc. (UWA) is a national membership organization open to all Women.

ARTICLE IV- MANNER OF ELECTION

The Board of Directors shall be selected every 2 years by the members of the Executive Committee.

ARTICLE V- INITIAL OFFICERS AND/OR DIRECTORS

THE NAMES AND ADDRESSES OF THE INITIAL OFFICERS AND/OR DIRECTORS ARE:

Maguelena Aldophe President & Executive Director 1045 NW 155th Ln

Ste 301 Miami, Florida 33169

Lucia Davis-Raiford Vice-President 19731 West Oakmont Dr Miami, Florida 33015

THE UNDERSIGNED OFFICERS HAVE EXECUTED THESE ARTICLES OF INCORPORATION THIS19TH DAY OFMAY, 2015	_
SIGNATURES OF THE OFFICERS:	
MAGUELENA ALDOPHE	
Lucia Davis-Raiford	

SWORN AND SUBSCRIBED BEFORE BE THIS 19TH DAY OF MAY, 2015 IN MIAMI, FLORIDA, COUNTY OF DADE.

EXPIRES: March 31, 2016 Bonderl Thru Budget Notary Services

UNITED WOMEN'S ALLIANCE, INC. 1045 NW 155^{TH} Ln, Ste 301 Miami, Florida 33169 May 19, 2015 Department of State **Division of Corporations** Not for profit corporation P.O. Box 6327 Tallahassee, FL 32314

ARTICLE VI- REGISTERED AGENT

THE NAME AND STREET ADDRESS OF THE REGISTERED AGENT:

Iyana Wyke 2221 Arcadia Dr Miramar, Florida 33023

ARTICLE VII- INCORPORATOR

THE NAME AND ADDRESS OF THE INCORPORATOR:

Maguelena Aldophe 1045 NW 155TH Ln Ste 301 Miami, Florida 33169

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

Required signature of Registered Agent

5/19/2015 Date

I submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S

Required signature of Incorporator

Date

15 JUN -2 PH 5: 03