## 1190002653

(Requestor's Name)				
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(City/State/Zip/Ph	none #)			
PICK-UP WAIT	MAIL			
(Business Entity Name)				
(Document Number)				
Certified Copies Certifica	ates of Status			
Special Instructions to Filing Officer:				

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## **COVER LETTER**

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

FROM:

LGBTQ Hous	ing Authority of South Florida	a, Inc. DRATÉ NAMÉ – <u>MUST INC</u>	LIDE SUFFIX)
Enclosed is an original a		ticles of Incorporation and	
\$70.00 Filing Fee	S78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy	□ \$87.50 Filing Fee, Certified Copy & Certificate
		ADDITIONAL COPY REQUIRED	
	Cindu Brown		

Name (Printed or typed)

735 NE 125th Street

Address

North Miami, Fl 33161

City, State & Zip

305.364.5319 or 786.210.0613

Daytime Telephone number

cbrown@jcsfl.org

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**

February 14, 2019

CINDY BROWN 735 NE 125TH STREET NORTH MIAMI, FL 33161

SUBJECT: LGBTQ HOUSING AUTHORITY OF SOUTH FLORIDA

Ref. Number: W19000014633

We have received your document for LGBTQ HOUSING AUTHORITY OF SOUTH FLORIDA 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) 245-6052.

Tyrone Scott Regulatory Specialist II New Filings Section

Letter Number: 719A00003211

Corrected 
Note change Authority to

Collective

Collective

Call me (Squestions)

Call me (Squestions)

(all me (Suby Brown 10 Doins).

www.sunbiz.org

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## ARTICLES OF INCORPORATION

In compliance with Chapter 617 (Not for Profit)

RTICLE II	NAME LGBTQ Housing corporation shall be:  PRINCIPAL OFFICE				
601 E	Principal <u>street</u> uddress: spanola Way	c/o	Mailing address, if d	lifferent is:	
Miam	i Beach, Fl 33139	73.	5 NE 125th Street		
			orth Miami, Fl 33161		
	PURPOSE r which the corporation is organized i	s:			
o identify and	I provide affordale housing options to	at are open and affirm	ing for LGBTQ residents		
				As stated in	the B
RTICLE IV				As stated in need:	the By
RTICLE IV				As stated in need:	the By
RTICLE IV				As stated in ted:	the By
	MANNER OF ELECTION The	manner in which the di		As stated in need:	the By
RTICLE V	MANNER OF ELECTION The  INITIAL OFFICERS AND/OR DI	manner in which the di	rectors are elected and appoi		the By
RTICLE V	MANNER OF ELECTION The  INITIAL OFFICERS AND/OR DI  Randi Adler, Secretary  E: #200	manner in which the distance in which the di	rectors are elected and appoi		the By
RTICLE V	MANNER OF ELECTION The  INITIAL OFFICERS AND/OR DI  Randi Adler, Secretary  E: #200	manner in which the dispersion of the dispersion	rectors are elected and appoint		the By
RTICLE V	MANNER OF ELECTION The  INITIAL OFFICERS AND/OR DI  Randi Adler, Secretary 18999 Biscayne Blvd., #200  Aventura, Fl 33180	manner in which the discrete d	Joan Schaeffer, Member 6690 SW 131 Street Pinecrest, FI 33156		the By
RTICLE V  Name and Title  Address	MANNER OF ELECTION The  INITIAL OFFICERS AND/OR DI  E. Randi Adler, Secretary 18999 Biscayne Blvd., #200  Aventura, Fl 33180  Cindy Brown, President  E. Large Manner Street	manner in which the discrete d	rectors are elected and appoint the:    Joan Schaeffer, Member   6690 SW 131 Street		the By
RTICLE V  Name and Title  Address	MANNER OF ELECTION The  INITIAL OFFICERS AND/OR DI  E. Randi Adler, Secretary 18999 Biscayne Blvd., #200  Aventura, Fl 33180  Cindy Brown, President  E. Large Manner Street	manner in which the discrete d	Joan Schaeffer, Member 6690 SW 131 Street Pinecrest, FI 33156	2019 MAR -	the By
RTICLE V lame and Title ddress	MANNER OF ELECTION The  INITIAL OFFICERS AND/OR DI  E. Randi Adler, Secretary 18999 Biscayne Blvd., #200  Aventura, Fl 33180  Cindy Brown, President e: 1873 NE 154 Street	manner in which the discrete d	Joan Schaeffer, Member 6690 SW 131 Street Pinecrest, FI 33156	2019 MAR - 6	the By
RTICLE V lame and Title ddress	MANNER OF ELECTION The  INITIAL OFFICERS AND/OR DI  E. Randi Adler, Secretary 18999 Biscayne Blvd., #200  Aventura, Fl 33180  Cindy Brown, President 1873 NE 154 Street  North Miami, Fl 33162	manner in which the discrete d	rectors are elected and appoint le:    Joan Schaeffer, Member	2019 MAR - 6 AM 6:	the By
Address Name and Titl Address	MANNER OF ELECTION The  INITIAL OFFICERS AND/OR DI  E. Randi Adler, Secretary 18999 Biscayne Blvd., #200  Aventura, Fl 33180  Cindy Brown, President e: 1873 NE 154 Street	manner in which the discrete d	Joan Schaeffer, Member 6690 SW 131 Street Pinecrest, FI 33156	2019 MAR -6 AM <b>8:</b> 16	the By

Name and Title:		Name and Title:
•		
N 1971		Nieuwan Jawa
		Name and Title:
Address		Address:
-		
	<i>EGISTERED AGENT</i> r <mark>ida street address</mark> (P.O. Box NOT acce	ptable) of the registered agent is:
Name:	Cenergy, LLC	
Address:	1873 NE 154 Street	
	North Miami Beach, Fl 331	62
	NCORPORATOR ress of the Incorporator is:	
Name:	Cindy Brown	
Address:	1873 NE 154 Street	
rametts.	North Miami Beach, Fl 331	162
ARTICI F VIII - I	EFFECTIVE DATE:	
Effective date, if of	her than the date of filing:	. (OPTIONAL)  nd cannot be more than five days prior or 90 days after the filing.)
(if an effective das	te is fisted, the date must be specific ar	id cannot be more than five days prior or 50 days after the hong.)
	nserted in this block does not meet the ap we date on the Department of State's reco	oplicable statutory filing requirements, this date will not be listed as the ords.
	miliar with and accept the appointment of	of process for the above stated corporation at the place designated in this is registered agent and agree to act in this capacity    1/3  70 (9
	Required Signature of Registered	r Agent Date
	nent and affirm that the facts stated her of State constitutes a third degree felony	ein are true. I am aware that any false information submitted in a document as provided for in s.817.155, F.S.

1/31/2019