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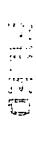


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COVER LETTER

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

SUBJECT:		YOUTH CENTER INC. ORATE NAME - MUST IN	C) TIME SUFFIX
	(FROTOSED COR	ORATIONALIZATION	<u> </u>
nclosed is an original and	one (1) copy of the Art	ticles of Incorporation and	a check for:
□ \$70.00 Filing Fec	■ \$78.75 Filing Fee & Certificate of Status	■\$78.75 Filing Fee & Certified Copy	☐ \$87.50 Filing Fee, Certified Copy & Certificate
		ADDITIONAL CO	PY REQUIRED
	17 IN & 33 / A	LDON	
FROM:	Name (Printed or typed)		_
	244 NW 22	ND STREET	
		Address	-

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

HOMESTEAD, FL 33030

(646) 831-9624

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

City, State & Zip

Daytime Telephone number

ARTICLES OF INCORPORATION

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

ARTICLE 1 - NAME

The name of the corporation shall be:

KEEPING IT MOVING YOUTH CENTER INC.

ARTICLE II - PRINCIPAL OFFICE

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

The principal street address shall be 244 NW 22ND Street, Homestead, FL 33030 and any other such place or places as the board may deem from time to time.

ARTICLE III - PURPOSE

The purpose for which the corporation is organized is:

To create a creative space for youth development designed to build self-esteem, improve health & personal care, social skills and communication through education and self-discovery modules. Our values are built on respect, safety, trust and inclusion.

ARTICLE IV - MANNER OF ELECTION

The manner in which the directors are elected or appointed:

Directors will be selected by the incorporator and there after will be through a quorum vote of the appointed board of directors.

ARTICLE V-INITIAL DIRECTORS AND/OR OFFICERS

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

Kim Waldon, 244 NW 22nd Street, Homestead, FL 33030 President/CEO -

Susan Donegan, 14 Beach Street, WY And ANCH, New York, 11797 Ethel Coaxum, 1309 5th Avenue #9C. New York, NY 10029 Vice Pres-

SecretaryFreusurerElla Mayo. 244 NW 22

Asst. TreasurerLeanna Simmons, 620 Lenox Ave #14N, New 1011.

ARTICLE VI - INITIAL REGISTERED AGENT AND STREET ADDRESS
The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

The name and Florida street. Homestead, FL 33030

The name and address of the Incorporator

Kim Waldon, 244 NW 22nd Street, Homestead, FL 33030

Name and Title:	Name and Title:	
Address		
Name and Title:		
Address		
ARTICLE VI REGISTERED AGENT		
The name and Florida street address (P.O. Box	c NOT acceptable) of the registered agent is:	
Name:		
Address:		~ }
		1:. 1020
		2020 HAY 22
ARTICLE VII INCORPORATOR		22
The <u>name and address</u> of the Incorporator is:		SSE PH
Name:		17
Address:		S.ME
		•
ARTICLE VIII EFFECTIVE DATE:		
Effective date, if other than the date of filing:	. (OPTION	VAL)
(If an effective date is listed, the date must be	e specific and cannot be more than five da	ys prior or 90 days after the filing.)
Note: If the date inserted in this block does no document's effective date on the Department of	t meet the applicable statutory filing requires f State's records.	nents, this date will not be listed as the
Having been named as registered agent to acc certificate, I am familiar with and accept the ap,	cept service of process for the above stated pointment as registered agent and agree to a	corporation at the place designated in this ct in this capacity
		5/18/2020
Required Signature of	f Registered Agent	Date
I submit this document and affirm that the facts the Department of State constitutes a third degr	stated herein are true. I am aware that any J	alse information submitted in a document to
1/ -1/4	-	5/12/2020
Required Signat	ure of Incorporator	5 12 2020 Date
- Table 1 - Tab	•	