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COVER LETTER

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

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SUBJECT: Wor	nen's Energizing Network, In- PROPOSED CORPORATE NAM	e. 1E – <u>Must include suffix</u>)	
Enclosed is an origin \$70.00 Filing Fee	nal and one (1) copy of the Arti \$78.75 Filing fee & Certificate of Status	cles of Incorporation and a check for: X	ee. ppy :
FROM:	Cariluz Gra Name (Printe 4861 NW 5 Add Plantation, City, Stat (305) 479-8	ed or typed) th Street ress FL 33317 re & Zip	
NC	Daytime Teleper elariluz@tri E-mail address: (to be used for fi	Daytime Telephone number clariluz@truetypepinc.com ail address: (to be used for future annual report notification) Please provide the original and one copy of the articles.	

ARTICLES OF INCORPORATION

in compliance with Chapter 617, F.S., (Not for Profit)

Article I NAME

Women's Energizing Network, Inc.

(EIN# 85-3785108)

2621 JATE - 4 PM 4: 36

Article II

PRINCIPAL OFFICE

Principal Street address

Mailing address, if different is:

4861 NW 5th St.

The name of the corporation shall be:

Plantation, FL 33317

SAME

Article III **PURPOSE**

The purpose for which the corporation is organized is:

Said organization is organized exclusively for charitable, religious, educational, and scientific purposes, including, for such purposes, the making of distributions to organizations that qualify as exempt organizations described under Section 501(c)(3) of the Internal Revenue Code, or corresponding section of any future federal tax code.

Article IV MANNER OF ELECTION The manner in which the directors are elected and appointed:

As provided in the By-Laws.

Article V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:

Keysha Hall, President 9960 Lazy Cove Lane

Brookshire, TX 77423

Name and Title:

Nicholas Graham, Vice President

Address:

Address:

4861 NW 5th Street Plantation, FL 33317

Name and Title:

Aleyda Cordoba, Board Chair

Address:

4861 NW 5th Street

Plantation, FL 33317

Article VI REGISTERED AGENT

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

Name and Title:

Clariluz Graham, Founder/CEO

Address:

4861 NW 5th Street

Plantation, FL 33317

Article VII **INCORPORATOR**

The name and Florida street address (P.O. box NOT acceptable) of incorporator is:

Name and Title:

Clariluz Graham, Founder/CEO

Address:

4861 NW 5th Street Plantation, FL 33317

Article VIII Purpose Clause

No part of the net earnings of the Corporation shall inure to the benefit of, or be distributed to its members, trustees or other private persons, except that the Corporation shall be authorized and empowered to pay reasonable compensation for services rendered and to make payments and distributions in furtherance of the purposes set forth in Article III hereof. No substantial part of the activities of the Corporation shall be the carrying on of propaganda, or otherwise attempting to influence legislation, and the Corporation shall not participate in, or intervene in (including the publishing and distribution of statements) any political campaign on behalf of or in opposition to any candidate for public office.

Article IX Dissolution of Assets

Upon the dissolution of the Corporation, assets acquired by the Corporation shall be distributed for one or more exempt purposes within the meaning of Section 501c3 of the Internal Revenue Code, or the corresponding section of any future federal tax code, or shall be distributed to the federal government, or to the state or local government, for a public purpose. Any such assets not so disposed of shall be disposed of by a Court of Competent Jurisdiction of the county in which the principle office of the Corporation is located, exclusively for such purposes or to such organization or organizations, as said Court shall determine which are organized and operated exclusively for such purposes.

Having been named as the 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

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 Registered Agent