

N25000004188

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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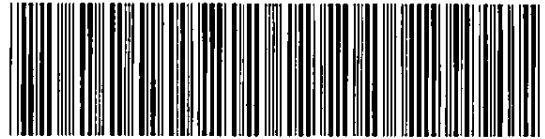
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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T.S. 4/19/25

## COVER LETTER

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

**SUBJECT:** The ArtReach Project, Inc.

(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)

Enclosed is an original and one (1) copy of the Articles of Incorporation and 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 COPY REQUIRED**

**FROM:** Aisha Brooks  
\_\_\_\_\_  
Name (Printed or typed)

17310 NW 41st Ave.  
\_\_\_\_\_  
Address

Miami Gardens, FL 33055  
\_\_\_\_\_  
City, State & Zip

(786) 423-1119  
\_\_\_\_\_  
Daytime Telephone number

asbrooks03@aol.com

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

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

2005 DEC 23 PM 3:05

## ARTICLES OF INCORPORATION

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

### ARTICLE I NAME

The name of the corporation shall be: The ArtReach Project, Inc.

### ARTICLE II PRINCIPAL OFFICE

Principal street address:  
17310 NW 41st Ave.

Miami Gardens, FL 33055

Mailing address, if different is:

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Exclusively for charitable, educational, and scientific purposes as defined  
under section 501(c)(3) of the Internal Revenue Code. Our mission includes providing educational programs, community  
and resources to enhance individual and community well-being. Upon dissolution, all assets shall be distributed for one or  
exempt purposes within the meaning of section 501(c)(3), or shall be distributed to the federal government, or state or local  
government for a public purpose.

### ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected and appointed: At any regular or  
special meeting of the Board of Directors by a majority vote of those present.

### ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Aisha Brooks, CEO

Address: 17310 NW 41st Ave.  
Miami Gardens, FL 33055

Name and Title: Latoya Porter, SEC.

Address: 15331 NW 32nd Ave.  
Opa-Locka, FL 33054

Name and Title: Geneva Green, PRES

Address: 179 NW 59th Street, #4  
Miami, FL 33142

Name and Title: Alessandra Williams, TRES.

Address: 2975 NW 199th Terrace  
Miami Gardens, FL 33056

Name and Title: Chad Norton, V. PRES.

Address: 4701 NW 15th Ave.  
Miami, FL 33142

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_ Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_ Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

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

Name: Aisha Brooks

Address: 17310 NW 41st Ave.

Miami Gardens, FL 33055

**ARTICLE VII INCORPORATOR**

The **name and address** of the Incorporator is:

Name: Aisha Brooks

Address: 17310 NW 41st Ave.

Miami Gardens, FL 33055

2025 MAR 23 PM 3:07

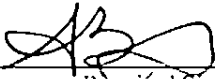
**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: \_\_\_\_\_ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

*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

3/18/2025  
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

3/18/2025  
Date

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

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Mailing address, if different is:

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Miami, FL 33142

Name and Title:

Address:

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address \_\_\_\_\_ Address: \_\_\_\_\_

\_\_\_\_\_

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address \_\_\_\_\_ Address: \_\_\_\_\_

\_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

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

Name: Aisha Brooks \_\_\_\_\_

Address: 17310 NW 41st Ave. \_\_\_\_\_

Miami Gardens, FL 33055 \_\_\_\_\_

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Aisha Brooks \_\_\_\_\_

Address: 17310 NW 41st Ave. \_\_\_\_\_

Miami Gardens, FL 33055 \_\_\_\_\_

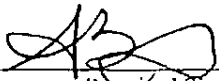
**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: \_\_\_\_\_ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

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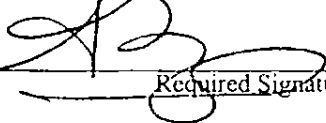


\_\_\_\_\_  
Required Signature of Registered Agent

3/18/2025

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Required Signature of Incorporator

3/18/2025

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Date