

TRANSMITTAL LETTER

95000000147

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

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-12/13/95--01006--003
****131.25 ****131.25

SUBJECT: BLACK DEAF/HARD OF HEARING ASSOCIATION OF MIAMI, 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
- \$122.50 Filing Fee & Certified Copy
- \$31.25 Filing Fee, Certified Copy & Certificate

96 JAN -9 AM 11:21
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

FROM: Darryl M. Bowles
Name (Printed or typed)

6607 N.W. 3rd Avenue
Address

Miami, FL 33150
City, State & Zip

Phone (305)759-7100
Beeper (305)263-6073

Daytime Telephone number

2479
Cone
suffix
12/1/95
12/1/95
12/1/95
12/1/95
12/1/95

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



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

December 21, 1995

DARRYLM. BOWLES
6607 NW 3RD AVENUE
MIAMI, FL 33150

SUBJECT: BLACK DEAF/HARD OF HEARING ASSOCIATION OF MIAMI,
INCORPORATED
Ref. Number: W95000024791

We have received your document for BLACK DEAF/HARD OF HEARING ASSOCIATION OF MIAMI, INCORPORATED and check(s) totaling \$131.25. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

PLEASE LIST ONLY ONE CORPORATE SUFFIX IN THE CORPORATE NAME.

Section 617.0202(d), Florida Statutes, requires the manner in which directors are elected or appointed be contained in the articles of incorporation. A statement making reference to the bylaws is acceptable.

According to section 607.0202(1)(b) or 617.0202(1)(b), Florida Statutes, you must list the corporation's principal office, and if different, a mailing address in the document. If the principal address and the registered office address are the same, please indicate so in your document.

Please return 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 (904) 487-6878.

Terri Buckley
Corporate Specialist

Letter Number: 095A00055024

ARTICLES OF INCORPORATION

- The undersigned, acting as incorporator(s) of a corporation pursuant to chapter 617, Florida Statutes, adopt(s) the following Articles of Incorporation:

ARTICLE I

Name

The name of the corporation shall be: African American Deaf/Hard of Hearing Association of Miami, Incorporated

ARTICLE II

Principal place of business and mailing address

The principal place of business and mailing address of this corporation shall be:

Principal Place of Business

6607 N.W. 3rd Avenue
Miami, Florida 33150

Mailing Address

c/o Christine Ponder
P.O. Box 3167
Florida City, Florida 33034

56 JAN -9 AM 11:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE III

Purpose(s)

The specific purpose(s) for which the corporation is organized is(are):

The general nature of the objects and purposes of this corporation shall be engaged in any and all lawful activities which non-profit corporations may engage in under the laws of the State of Florida, and limited by those activities permitted under Section 527, Internal Revenue Code of 1995, as now in force, hereafter amended, and to promote the following objects:

1. Improve educational opportunities
2. Improve employment opportunities
3. Improve housing opportunities
4. Improve counseling opportunities

ARTICLE IV

Manner of election of directors

The manner in which the directors are elected or appointed is as follows:

The board of directors shall consist of the president, vice-president, secretary, treasurer, and the immediate past president. If the immediate past president is one of the present officers, or is unable to serve, the president, with the approval of the board, will appoint a fifth member.

Officers are elected for a two year term. An individual cannot serve more than 2 consecutive terms as President. There is no restriction on the number of terms an individual can serve as Vice-President, Secretary, or Treasurer. No individual may hold more than one office at a time. Term of office begins with the first meeting in the Fall after elections in the Spring. The first Fall meeting is planned and conducted by the newly elected officers.

ARTICLE V

Limitation of corporate powers

The corporate powers of this corporation are as provided in section 617.0302, Florida Statutes, unless limited are as follows:

NO ADDITIONAL LIMITATIONS

ARTICLE VI

Initial registered agent and street address

The name and the street address of the initial registered agent is:

Mrs.-Christine Ponders
10820 S.W. 200 Drive, Apt. S-319D
Miami, FL 33157

ARTICLE VII

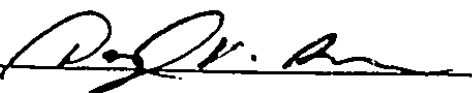
Incorporators

The name(s) and the street address(es) of the incorporator(s) for these articles of incorporation is(are):

Darryl M. Bowles..... 6607 N.W. 3rd Avenue, Miami, FL 33150
Stacy E. Stringer..... 7131 N.E. Miami Ct., Miami, FL 33138

The undersigned incorporator has executed these Articles of Incorporation this 21 day of November, 19 95.

Signature of Incorporator:



Darryl M. Bowles
Typed name of incorporator signing



Stacy E. Stringer

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 617.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is:

African American Deaf/Hard of Hearing Association, Inc.
(must include suffix)

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SECRETARY OF STATE
TALLAHASSEE
FLORIDA

2. The name and address of the registered agent and office is:

Mary Christine Ponder
(NAME)

10820 S.W. 200th Drive Unit 5319D
(P.O. Box or Mail Drop Box NOT ACCEPTABLE)

Miami, Florida 33157
(CITY/STATE/ZIP)

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Christine Ponder
(SIGNATURE)

11-21-1995
(DATE)

N96000000147

Mary C Ponder
P.O. Box 3167
Fl. Cty, Fl 33034

Office Use Only

NUMBER(S), (if known):

- 1. _____ (Corporation Name) _____ (Document #)
- 2. _____ (Corporation Name) _____ (Document #)
- 3. _____ (Corporation Name) _____ (Document #)
- 4. _____ (Corporation Name) _____ (Document #)

- Walk in
- Pick up time _____
- Certified Copy
- Mail out
- Will wait
- Photocopy
- Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input checked="" type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

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DIVISION OF CORPORATIONS
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OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

Examiner's Initials

ARTICLES OF DISSOLUTION

Pursuant to section 617.1403, Florida Statutes, this Florida nonprofit corporation submits the following Articles of Dissolution:

FIRST: The name of the corporation is AFRICAN AMERICAN BOARD OF
SECOND: Adoption of dissolution HEARING ASSOCIATION OF MIAMI,
INCORPORATED
(Complete Section I or II)

SECTION I

If the corporation has members entitled to vote:

The date of the meeting of members at which the resolution to dissolve was adopted was _____ .

(CHECK ONE)

- The number of votes cast for dissolution was sufficient for approval.
- The resolution was adopted by written consent and executed in accordance with 617.0701, Florida Statutes.

SECTION II

If the corporation has no members or members with voting rights:

The corporation has no members or members with voting rights.

The date of adoption of the resolution by the board of directors was FEBRUARY 10, 1996 .

The number of directors in office was 3 and the vote for the resolution was 3 for and 0 against.

Signed this 11th day of FEBRUARY, 19 96 .

Signature Mary C. Ponder
(By the Chairman or Vice Chairman of the Board, President or other officer)

MARY C. PONDER
Typed or printed name
CHAIRMAN OF THE BOARD
Title

FILED
RECORDS SECTION
DEPARTMENT OF STATE
60 FEB 15 PM 12:25
TALLAHASSEE, FLORIDA

N96000000147

MR. DARRYL BOWLES
6607 N.W. 3rd Avenue
Miami, Fl. 33150

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*****35.00 *****35.00

Office Use Only

COR

T NUMBER(S), (if known):

1. _____
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

- Walk in Pick up time _____ Certified Copy
 Mail out Will wait Photocopy Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
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REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

SH 4/8
Revocation of Dissolution

FILED
SECTION OF STATE
DIVISION OF CORPORATIONS
96 APR 15 PM 1:10

Examiner's Initials

ARTICLES OF REVOCATION
OF DISSOLUTION

Pursuant to section 617.01201, Florida Statutes, this Florida nonprofit corporation submit the following Articles of Revocation of Dissolution, filed in accordance with section 617.01201, Florida Statutes.

The effective date of the dissolution is February 15, 1996

The name of the corporation is African American Deaf/Hard of Hearing Association of Miami Inc.

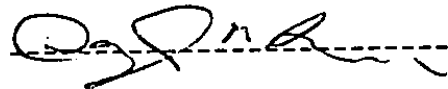
The corporation has no members with voting right.

On this day, March 12, 1996, the board of director adopt this resolution.

The number of directors in office is 4 and the vote for the resolution is 4 for and 0 against.

PA 50
SECRETARY OF STATE
DIVISION OF CORPORATIONS
96 APR 15 PM 1:11

Signed this 12th day of March, 1996



DARRYL BOWLES

PRESIDENT

ARTICLES OF DISSOLUTION

Pursuant to section 617.1403, Florida Statutes, this Florida nonprofit corporation submits the following Articles of Dissolution:

FIRST: The name of the corporation is AFRICA AMERICA CENTER OF
SECOND: Adoption of dissolution HEARING ASSOCIATION OF MIAMI,
INCORPORATED
(Complete Section I or II)

SECTION I

If the corporation has members entitled to vote:

The date of the meeting of members at which the resolution to dissolve was adopted was _____.

(CHECK ONE)

- The number of votes cast for dissolution was sufficient for approval.
- The resolution was adopted by written consent and executed in accordance with 617.0701, Florida Statutes.

SECTION II

If the corporation has no members or members with voting rights:

The corporation has no members or members with voting rights.

The date of adoption of the resolution by the board of directors was FEBRUARY 10, 1996.

The number of directors in office was 3 and the vote for the resolution was 3 for and 0 against.

Signed this 11th day of FEBRUARY, 19 96.

Signature Mary C. Foster
(by the Chairman or Vice Chairman or the Board, President or other officer)

MARY C. FOSTER
Typed or printed name
CHAIRMAN OF THE BOARD
Title

06 FEB 15 PM 12:25