

N96000002199

TRANSMITTAL LETTER

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

000001787460
-04/19/96--C1070--005
*****78.75 *****78.75

SUBJECT: HANDICAPPED VETERANS ASSOCIATION, 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

☐ \$131.25
Filing Fee,
Certified Copy
& Certificate

FROM: Willie Lewis Peterson Jr.
Name (Printed or typed)

11531 N.W. 17 AVE.
Address

Miami, Florida 33167
City, State & Zip

(305) 688-5318
Daytime Telephone number

FILED
96 APR 19 PM 12:24
TALLAHASSEE, FLORIDA
STATE

APR 23 1996

BLB

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

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:

HANDICAPPED VETERANS ASSOCIATION INC.

ARTICLE II

Principal place of business and mailing address

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

11531 N.W. 17 AVE.
Miami, Florida 33167

FILED
96 APR 19 PM 12:24
TALLAHASSEE, FLORIDA

ARTICLE III

Purpose(s)

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

The specific purpose of HANDICAPPED VETERANS ASSOCIATION INC. , will be to help enrich the lives of veterans and the families of of veterans throughout the state of Florida. HANDICAPPED VETERANS ASSOCIATION INC. will achieve this goal by way of the distribution of food baskets to veterans and the families of veterans on holidays such as Christmas, Easter, and Thanksgiving. HANDICAPPED VETERANS ASSOCIATION INC. will also provide financial assistance to veterans for the purchase of necessary medical aides such as wheelchairs and crutches. The way that HANDICAPPED VETERANS ASSOCIATION INC. will fund its projects is through the solicitation of donations by way of telemarketing. NOTE: HANDICAPPED VETERANS ASSOCIATION INC. will provide for its own tele-~~mark~~ARTICLE IV marketing campaign. No professional fund raising Manner of election of directors company will be used.

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

All directors will be appointed by the President of the corporation.

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

ARTICLE VI

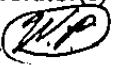
Initial registered agent and street address

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

Florence M. Roucoulet
11531 N.W. 17 AVE.
Miami, Florida 33167

ARTICLE VII

Incorporators

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

Willie Lewis Peterson Jr.
11531 N.W. 17 AVE.
Miami, Florida 33167

The undersigned incorporator has executed these Articles of Incorporation this 1st day of April, 19 96.

Signature of Incorporator:

Willie L. Peterson

Willie L. Peterson Jr.
Typed name of incorporator signing

**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:

HANDICAPPED VETERANS ASSOCIATION INC.

(must include suffix)

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

FLORENCE M. ROUCOULET

(NAME)

11531 N.W. 17 AVE.

(P.O. Box or Mail Drop Box **NOT** ACCEPTABLE)

MIAMI, FLORIDA 33167

(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.

Florence Roucoulet

(SIGNATURE)

April 1, 1996

(DATE)

95 APR 19 PM 12:25
TALLAHASSEE, FLORIDA

N96000002199

Requestor's Name

8/1/96

Willie Peterson 305 C. 55-5315
 HANDICAPPED VETERANS ASSOCIATION INC
 115 31 NW 17 AVE
 Miami FL 33167

Office Use Only

(If known):

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

000001917260
 -08/09/96--01004--020
 *****35.00 *****35.00

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

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

95 AUG -5 PM 1:55

APPROVED
 AND
 FILED

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
<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

Handwritten signature and date 8/1/96

Examiner's Initials	
---------------------	--

ARTICLES OF AMENDMENT
to
ARTICLES OF INCORPORATION
of

HANDICAPPED VETERANS ASSOCIATION INC.

Pursuant to the provisions of section 617.1006, Florida Statutes, the undersigned Florida nonprofit corporation adopts the following articles of amendment to its articles of incorporation.

FIRST: Amendment(s) adopted: (INDICATE ARTICLE NUMBER(S) BEING AMENDED (ADDED OR DELETED))

Article VII (7)

President AND Director
Willie Lewis Peterson JR.
11531 NW 17 AVE
Miami, Florida 33167

Secretary / Program Services
Willie L. Peterson SR.
6415 N.W. 1st PLACE
Miami, Florida 33150

SECOND: The date of adoption of the amendment(s) was: August 1, 1996

THIRD: Adoption of Amendment (CHECK ONE)

- ☐ The amendment(s) was(were) adopted by the members and the number of votes cast for the amendment was sufficient for approval.
- ☒ There are no members or members entitled to vote on the amendment. The amendment(s) was(were) adopted by the board of directors.

HANDICAPPED VETERANS ASSOCIATION INC.

Corporation Name

Willie L. Peterson JR
Signature of Chairman, Vice Chairman, President or other officer

WILLIE L. PETERSON JR
Typed or printed name

President
Title

8-1-96
Date

RECEIVED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
APPROVED
AND
FILED