N96000004121

TRANSMITTAL LETTER

FILED
96 AUG -7 AM 9:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

SUBJECT: HIWAY PARK BLACK BUSINESSMEN ASSOC. INC.
(Proposed corporate name - must include suffix)

500001900925
-07/23/96--01005--002
****131.25 ****131.25

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

☐ $70.00	☐ $78.75	☐ $122.50	☑ $131.25
Filing Fee	Filing Fee & Certificate	Filing Fee & Certified Copy	Filing Fee, Certified Copy & Certificate

FROM: MUETRY STRONG
Name (Printed or typed)

108 MAIN STREET
Address

LAKE PLACID, FL 33852
City, State & Zip

(941) 465-2125
Daytime Telephone number

[illegible] GAVE
AUTHORIZATION BY PHONE TO
CORRECT [illegible]
DATE
DOC. EXAM.

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

[illegible]

8/7/96

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

July 23, 1996

MOETRY STRONG
108 MAIN STREET
LAKE PLACID, FL 33852

SUBJECT: HIWAY PARK BLACK BUSINESSMEN ASSOC.
Ref. Number: W96000015337

We have received your document for HIWAY PARK BLACK BUSINESSMEN ASSOC. and your check(s) totaling $131.25. However, the enclosed document has not been filed and is being returned for the following correction(s):

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.

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) 487-6052.

Neysa Culligan
Document Specialist

Letter Number: 896A00035391

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:

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TALLAHASSEE, FLORIDA

ARTICLE I
Name

The name of the corporation shall be:

Hiway Park Black Businessmen Assoc Inc.

ARTICLE II
Principal place of business and mailing address

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

108 Main Street
Lake Placid, FL 33852

ARTICLE III
Purpose(s)

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

To have a safe structured enviroment where they receive counseling, tutorial, recreational activities, GED/High School diploma and workshop on various topics such as self-esteem building, family management Practices, conflict resolution, etc.

ARTICLE IV
Manner of election of directors

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

Directors are elected annually based on the following criteria: An open election, must be a member of the community a majority votes.

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

THE CORPORATE SEAL SHALL CONTAIN THE NAME OF THE CORPORATION BETWEEN TWO CONCENTRIC CIRCLES, AND IN THE CENTER OF THE INNER CIRCLE SHALL BE THE YEAR OF INCORPORATION.

ARTICLE VI
Initial registered agent and street address

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

MERRY STRONG
108 MAIN STREET
LAKE PLACID, FL 33852

ARTICLE VII
Incorporators

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

MERRY STRONG
108 MAIN STREET
LAKE PLACID, FL 33852

SUSAN GILBERT
104 SHORT STREET
LAKE PLACID, FL 33852

MELVIN HAWTHORNE
108 MAIN STREET
LAKE PLACID, FL 33852

GRANITH COLE
PO BOX 481
LAKE PLACID, FL 33852

The undersigned incorporator has executed these Articles of Incorporation this 17 day of July, 19 96.

Juanita Hawthorne

JUANITA HAWTHORNE
Notary Public, State of Florida
My comm. expires Mar 30, 1997
Comm. No. CC272588

Signature of Incorporator:

Mel Hawthorne

Mr. Melvin Hawthorne
Typed name of incorporator signing

JUANITA HAWTHORNE
Notary Public, State of Florida
My comm. expires Mar 30, 1997
Comm. No. CC272588

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:

HILLAY PARK BLACK BUSINESSMEN ASSOC INC.
(must include suffix)

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

MUETRY STRONG
(NAME)

108 MAIN STREET
(P.O. Box or Mail Drop Box NOT ACCEPTABLE)

LAKE PLACID FLORIDA 33852
(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.

Muetry Strong (Muetry Strong)
(SIGNATURE)

7-16-96
(DATE)