

N96000005238

TRANSMITTAL LETTER

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

SUBJECT: Latin-American AIDS Coalition Inc.
(Proposed corporate name - must include suffix)

400001970364
-10/10/96--01083--004
****122.50 ****122.50

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: Santiago Exposito.

Name (Printed or typed)

656 ne 125 st. suite#1. N.miami Fla. 33161.

Address

North Miami, Florida 33161.

City, State & Zip

(305)892-2202 Fax: (305)892-2209.

Daytime Telephone number

OCT 11 1996

BSP

FILED
96 OCT 10 AM 8:41
TALLAHASSEE, FLORIDA
STATE

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



LATIN - AMERICAN AIDS KOALITION

TEL: (305) 892 2202 FAX: (305) 892 2209

658 N.E. 125 ST. SUITE 1
NORTH MIAMI, FL 33161

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:

LATIN-AMERICAN AIDS COALITION, INC.

ARTICLE II

Principal place of business and mailing address

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

656N.E.125St. Suite#1.
North Miami, Florida.
33161.

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ARTICLE III

Purpose(s)

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

To provide information about and serve as a forum for education and services for the people with AIDS and HIV infection and concerned families friends and caregivers. To promote, represent, advocate for, and empower all people living with AIDS and HIV infection, regardless of gender, race religious beliefs, sexual orientation, or lifestyle in protection of our rights needs, and well-being. To provide or advocate for provision of high-quality, affordable, and accessible health and human services to those directly affected by AIDS and HIV infection. Also we are planning to offer Social Work and Case Management.

ARTICLE IV

Manner of election of directors

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

The Board of Directors will be composed of no less than three Officers chosen from among the members in good standing and by the members at the annual meeting of Directors held in accordance with the provisions. Officers shall be elected to office at annual meeting for 3 years, not including the 4 founders members. and shall preside until their successors are duly elected and qualified.

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 corporation shall have no less than seven directors and no more than eleven directors. Additional members shall be based on the needs of the corporation as defined by the board of directors. All persons regardless of race, gender, sexual orientation, disabilities, and or religious beliefs will be given equal consideration. Criteria requires applicant to: work as a volunteer member for one (1) year, be a legal U.S. resident provide police record, provide a letter to the Board of Directors including a resume.

ARTICLE VI

Initial registered agent and street address

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

Santiago Exposito
5505 N.W. 7th Street Apt. W316
Miami, FL 33126

ARTICLE VII

Incorporators

The name(s) and the street address(es) of the incorporator(s) for these articles of incorporation is(are): WILLIAM'S SUAREZ, 5505 NW 7 street, Apt. W316, Miami, Fl 33126
(President)

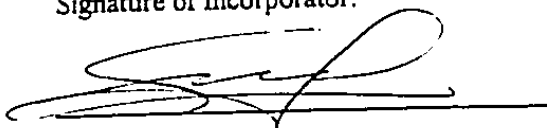
SANTIAGO EXPOSITO, 5505 NW 7 street, Apt. W316, Miami, Fl 33126
(Vice-President)

JULIO GOMEZ GONZALEZ, 750 NW 18 Terr., Apt. 1206, Miami, Fl 33136
(Executive Director)

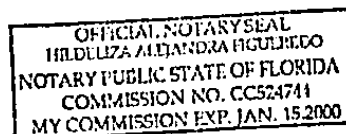
HILDELIZA FIGUEROA, 1741 SW 21 Terr., Miami, Fl 33145
(Treasurer)

The undersigned incorporator has executed these Articles of Incorporation this 2nd day of October
_____, 19 96 .

Signature of Incorporator:



Hildeliza Alejandra Figueroa



SANTIAGO EXPOSITO

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:

LATIN-AMERICAN AIDS COALITION, INC.

(must include suffix)

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

Santiago Exposito.

(NAME)

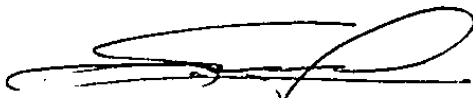
5505 NW 7 st. Apto: W316

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

Miami, Florida. 33126.

(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.

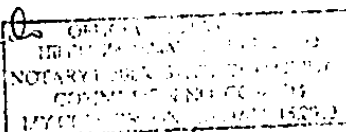


(SIGNATURE)

Oct-02-1996

(DATE)

Rodriguez Alejandro Juarez



FILED
OCT 10 AM 8:41
TALLAHASSEE, FLORIDA