

N96000006224

TRANSMITTAL LETTER

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

SECRETARY OF STATE  
12/05/96-01023-012  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

SUBJECT: Concerned Citizens Fight Against Aids, 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: Carlton Scott  
Name (Printed or typed)

1119 Florida Ave., Clewiston, Fl 33440  
Address

Clewiston, Fl 33440  
City, State & Zip

(941) 983 - 7699

Daytime Telephone number

FILED  
96 DEC -5 AM 9:27  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

See  
12/9

## 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:

Concerned Citizens Fight Against Aids, Inc.

### ARTICLE II

#### Principal place of business and mailing address

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

P.O. Box 356  
Clewiston, Fl 33440

### ARTICLE III

#### Purpose(s)

The specific purpose(s) for which the corporation is organized is(are):  
To help those infected and affected by the AIDS virus by creating a CENTER that will provide spiritual support, counseling and material assistance. We will alter the course of HIV infection with an aggressive community outreach program that will educate, promote behavioral change and appeal to human understanding.

### ARTICLE IV

#### Manner of election of directors

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

Board members will serve for a term of three years. Elections will take place at the annual meeting. The Vice President and Secretary will appoint a nominating committee that will present at least one candidate for each Board position. Nominations may also be made from the floor prior to the general election. Quorum for the General Meeting is 20% of the active membership. 51% of the general membership quorum vote will determine the outcome of general elections.

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**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:

Carlton Scott  
1119 Florida Ave.  
Clewiston, Fl 33440

**ARTICLE VII**

**Incorporators**

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

Elizabeth Clarke - 1052 Ala Ave.  
P.O. Box 752  
Clewiston, Fl 33440

Carlton Scott - 1119 Florida Ave.  
Clewiston, Fl 33440

The undersigned incorporator has executed these Articles of Incorporation this 21 day of NOVEMBER 19 96.

Signature of Incorporator:

Carlton Scott

Carlton Scott

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:

Concerned Citizens Fight Against AIDS, Inc.  
(must include suffix)

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

Carlton Scott

(NAME)

1119 Florida Ave.

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

Clewiston, Florida 33440

(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.*

Carlton S. Scott

(SIGNATURE)

11-21-96

(DATE)