## N 9900000 4883

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



CONTROL	· · · · · · · · · · · · · · · · · · ·
SUBJECT: KMAD C	LUB, INC.
(Proposed Corporate nar	ne - must include suffix
Enclosed is an original and one (1) copy of the articles	of incorporation and a check for
5 ( ) Py 1 min musics	
□ \$70.00	<b>X</b> \$78.75
Filing Fee	Filing Fee
	& Certificate
FROM: Rozanna Moore	
Name (Printed of typed)	
1950 N. Ding Island Dand C	42.4055
1859 N. Pine Island Road, S	te. #355 4000029449341 -07/29/3901046008
Address	-07/29/9901046008
Plantation, FL 33322	*****78.75 *****78.75
Ci ty, State & Zip	
(954) 718-2203	
Daytime Telephone number	

by the first the sales

F. CHESSER

AUG 4 1999

Submitted: 7/27/99.

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



## FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

August 4, 1999

ROZANNA MOORE 1859 N PINE ISLAND ROAD STE 355 PLANTATION, FL 33322

SUBJECT: KMAD CLUB, INC. Ref. Number: W99000018005

We have received your document for KMAD CLUB, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 617.0803, Florida Statutes, requires that the board of directors never have fewer than three directors.

Please return the original and one copy of 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 (850) 487-6904.

Freida Chesser Corporate Specialist

Letter Number: 699A00039444

## ARTICLES OF INCORPORATION

OF KMAD CLUB, INC.

ONE:

The name and address of this principal corporation is KMAD CLUB, Inc., 1839 N Pine Island Road, Ste. #355, Plantation, FL 33322, Broward County. The Corporation is organized pursuant to FLORIDA Nonprofit Corporation Code.

TWO:

This corporation is a non profit public benefit corporation and is not organized for the private gain of any person. The corporation is organized under the Nonprofit Public Benefit Corporation Law for charitable and educational purposes to aid the poor and disadvantaged individuals and families towards a life of self-sufficiency. The program shall consist of, but shall not be limited to: Economic Development, Community Enrichment, Social Reconstruction, Career Development, Scholarship, Youth at High Risk, Education, Tutoring, Literacy, and other programs to aid those in need.

THREE:

The duration of this corporation shall be perpetual, no stock and shall have no members.

FOUR:

The address of the Registered Office is 1859 North Pine Island Road, Ste. 355, Plantation, FL 33322, Broward County, and the name of the registered agent of the corporation shall be:

Rozanna Moore 1859 North Pine Island Road, Ste. 355 Plantation, FL 33322.

FIVE:

- (a) The corporation is organized and operated exclusively for Educational and Charitable purposes within the meaning of Section 501(c)(3) of the Internal Revenue Code.
- Notwithstanding any other provision of these Articles, the corporation shall not carry on any other activities not permitted to carry on (1) by a corporation exempt from Federal Income Tax under Section 501 (c)(3) of the Internal Revenue Code or (2) by a corporation contributions to which are deductible under Section 170 (c)(2) of the Internal Revenue Code.

SIX: The Directors are elected in accordance with the Bylaws. The name and address of the pesons appointed to act as the initial Directors of this corporation are:

NAME:

Rozanna Moore

1859 N. Pine Island Rd., Ste. 355
Plantation, FL 33322

Elsie Elizabeth Lotmore

8200 S.W. 22nd St.,
Pompano Beach, FL 33068

Tarisha L. Richardson

3615 S.W. 52nd Ave.,
Apt. # B204
Hollywood, FL 33023

SEVEN:

The property of this corporation is irrevocably dedicated to Charitable and Educational purposes and no part of the net income or assets of the organization shall ever inure to the benefit of any director, officer or member thereof or the benefit of any private person.

EIGHT:

On the dissolution or winding up of the corporation, its assets remaining after payment of, or provision for payment of, all debts and liabilities of this corporation shall be distributed to a nonprofit fund, foundation, or corporation, which is organized and operated exclusively for Religious, Charitable and Educational purposes under Section 501(c)(3) of the Internal Revenue Code, or corresponding section of any future Federal Tax Code, or shall be distributed to the Federal Government, or to a state or local government for a public purpose. Any such assets not disposed of shall be disposed of by the Court of Common Pleas of the county in which the principal office of the organization is then located, exclusively for such purposes or to such organization or organizations, as said Court shall determine, which are organized and operated exclusively for such purposes.

NINE:

Executed on July 27, 1999. The name and address of the incorporator of this corporation shall be:

Rozanna Moore

1859 N. Pine Island Road, Suite 355

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Plantation, FL 33322

## 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:		
	KMAD CLUB, INC.		St. 2 o com
2.	The name and address of the registered agent and office is:		
	Rozanna Moore  Name (Printed of typed)  1859 N. Pine Island Road, Ste. #355  Address		STATE OF THE PROPERTY OF THE P
	Plantation, FL 33322  Ci ty, State & Zip	<del>-</del>  -	-
	(954) 718-2203  Daytime Telephone number		

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 the capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and am familiar with and accept the obligations of my position as registered agent.

(Signature) 8 10 199.