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

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Enclosed is an origin	nal and one(1) copy of the article	s 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	
		ADDITIONAL CO	PY REQUIRED	
FRO	OM: Mr. Frank Tho Name (Prin		SECRETA	OLOCT 15
		dress	SSEE, FI ONE	POF STATE
Frank GAI	/E	ephone number		 .· .
AUTHORIZATION BY PHONE CORRECT GATTY DATE 10/17 DOC. EXAM BC				7)

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

(Proposed corporate name - must include suffix)

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Not for Profit Corporation Act, hereby adopt(s) the following Articles of Incorporation:

ARTICLE I NAME The name of the corporation shall be: M.L. K Labor and Community Coalition, Inc. ARTICLE II PRINCIPAL OFFICE
The name of the corporation shall be: M.L. Labor and Community Coalition, Inc. ARTICLE II PRINCIPAL OFFICE The principal place of business, and mailing address of this corporation shall be: 1800 N.W. 53E St. Miami, 71.33142
The specific purpose(s) for which the corporation is organized is(are): To provide Community Service and Counsel Labor Organizations
ARTICLE IV MANNER OF ELECTION OF DIRECTORS The manner in which the directors are elected or appointed is: Offointed by the membere
ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS
The name and Florida street address of the initial registered agent are: Karfil D. Williams 535 N.W. 42254. Miami, H. 33121
ARTICLE VI INCORPORATOR
The name and address of the Incorporator to these Articles of Incorporation are: MR. FRANK I hom A S Non Mi, FLA 33145 Mu Hrank Thomas Signature/Incorporator Date
/ Date
(An additional article must be added if an effective date is requested.)

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/Registered Agent