TRANSMITTAL LETTER

P98000018792

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314 98 FEB 26 PM 12: 44

30BJEC1: MINOR	LII AI WORK, INC	<u>. </u>		,= -
	(Proposed corporate	e name - must include si	uffix)	- <u>-</u>
Enclosed is an origina for :	il and one (1) cop	by of the articles of	incorporation and a	a check
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate	\$122.50 Filing Fee & Certified Copy	\$131.25 Filing Fee, Certified Copy & Certificate	
FROM:	Lucy	<u> </u>	<i>'</i> o	
;				
	11862	NW 13Th ST Address	REET	
		e PINES, Fl.	33026	
		ty, State & Zip		
-	Daytimo	735-0625	·	

100002435061--2 -02/19/98--01038--015 *****113.75 *****113.75

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

PP 02-21, 98



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

February 20, 1998

LUCY N. CASTILLO 11862 N.W. 13TH STREET PEMBROKE PINES, FL 33026

SUBJECT: M.W.W., INC. (MINORITY WOMEN AT WORK, INC.)

Ref. Number: W98000003800

We have received your document for M.W.W., INC. (MINORITY WOMEN AT WORK, INC.) and your check(s) totaling \$113.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must delete one of the names.

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) 487-6929.

Randall Purintun Document Specialist

Letter Number: 898A00009818

Enclosed is the deletion of the word Minority as first chaire, Enclosed is the deletion of the word Minority as first chaire, which work is not available the second choice weld be "Minority at work, Inc."

Thank you for your Cooperation

Leay N. Castello

ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

The general nature of the business to be transacted by this corporation, is to engage in any and all business permetted under the Laws of the STATE OF FloridA.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be: 11862 NW 13Th STREET PEMBROKE PINES, Fl. 33026

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

The MAXIMUM NUMBER OF SHARES OF STOCK THAT THIS CORPORATION IS AUTHORIZED TO HAVE OUTSTANDING AT ANYONE TIME IS 100 SHARES OF COMMON STOCK HAVING A PAR VALUE OF \$5,xxper Share.

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

LUCY N. CASTILO

11862 NW 13TH STREET

Pembroke pines, T. 1. 33026

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98 FEB 26 PM 12: 44

ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

The Name OF the INITIA) DIRECTOR OF This CORPORATION AN The STREET ADDRESS IS:

LUCY N. CASTILO

11862 NW 13Th STREET

Rembeoke Pines, Fl. 33026

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

177h day of February 1993.

Signature

Signature

Articles of Incorporation Filing Fee - \$35

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 or 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: MINORITY AT WORK, INC.	-	
2. The name and address of the registered agent and office is:		
Lucy N. CASTI/O (Name) 11862 NW. 13Th STREET (P.O. Box not acceptable) Pembroke Pines, Fl. 33026 (City/State/Zip)	98 FEB 26 PM 12: 44	SECRETARY OF STAIL
Having been named as registered agent and to accept service of process above stated corporation at the place designated in this certificate, I hereby the appointment as registered agent and agree to act in this capacity. I further to comply with the provisions of all statutes relating to the proper and companded of my duties, and I am familiar with and accept the obligations of my as registered agent. (Signature) (Date)	for the Ty accep Ther agrouphete per Ty position	t ee rfor- n