

Phone (503) 986-2200 Fax (503) 378-4381

Articles of incorporation—Nonprofit

Secretary of State Corporation Division 255 Capitol St. NE, Suite 151 Salem, OR 97310-1327 FilingInOregon.com

REGISTRY NUMBER: 36 4849-96

For office use only

FILED

JUN - 7 2006

OREGON SECRETARY OF STATE

71	must release this information to all parties upon reques	l and it will be p	osted on our website	For affice use a
	ase Type or Print Legibly in Black Ink. Attach Additional	Sheet if Neces	sary.	
)	NAME: Brooklyn Action Corps			
?)	REGISTERED AGENT		7) WILL THE CORPORATION HAVE MEMBERS? 7 YES NO	
	James Kelly		ORS 65,001(28) (a) "Member" means any person or persons en	titlad revisions to a demostic or foreign
)	REGISTERED AGENT'S PUBLICLY AVAILABLE ADDRESS (Must be an Oregon Street Address, which is identical to the registered agent's business office. Must include city, state, zip: No PO boxes.)		corporation's articles or bytaws, without regard to what a person is called in the articles or bytaws, to vote on more than one occasion for the election of a director or directors (b) A person is not a member by virtue of any of the following rights the person has	
	3534 SE Main Street		(A) As a delegate, (B) To designate or appoint a director or directo	rrs.
	Portland OR 97214-4263		(C) As a director; or (D) As a holder of an evidence of indebtedness issued or to be issued by the corpora	
			 (c) Notwithstanding the provisions of paragraph member if the person's membership rights have 	(a) of this subsection, a person is not a
Address for Mailing Notices		65 164 or 65 167		
P.O. Box 42651		4	Distribution of Assets Upon Dissolution	
	Portland OR 97242-0651		see attached	
	OPTIONAL PROVISIONS (Attach a separate sheet.) Type of Corporation (Select only one) Public Benefit Mutual Benefit Religio			
	INCORPORATORS (List names and addresses of each incorporator Attach a separate sheet if necessary) James Kelly - 3534 SE Main Street Portland OR 97214-4263			
	EXECUTION (All incorporators must sign. Attach a separate sh	eet if necessary)		FEES
	Signature	Printed Name		
	Jan 11/1		mes Kelly - Treasurer	Required Processing Fee \$ Confirmation Copy Optiona \$
	The f	Ja	nes avery - ricasuici	Processing Fees are horsefundar
				Please make check bayarient
) (CONTACT NAME (To resolve questions with this filing)	DAYTIME P	HONE NUMBER (Include area code)	NOTE Fees may be paid with 2 SA 19
-	James Kelly - Treasurer		3-241-4540	MasterCard. The card number and expiration date should be submitted on a separate sheet for local.

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501(c) (3) INFORMATION

Art. 8-

The purpose or purposes for which the corporation is organized are as follows:

Said organization is organized exclusively for charitable, educational, and scientific purposes, including, for such purposes, the making of distributions to organizations that qualify as exempt organizations under section 501 (c) (3) of the Internal Revenue Code, or corresponding section of any future federal tax code.

No part of the net earnings of the organization shall inure to the benefit of, or be distributable to its members, trustees, officers, or other private persons, except that the organization shall be authorized and empowered to pay reasonable compensation for services rendered and to make payments and distributions in furtherance of the purposes set forth in the purpose clause hereof. No substantial part of the activities of the organization shall be the carrying on of propaganda, or otherwise attempting to influence legislation, and the organization shall not participate in, or intervene in (including the publishing or distribution of statements) any political campaign on behalf of any candidate for public office. Notwithstanding any other provision of this document, the organization shall not carry on any other activities not permitted to be carried on (a) by any organization exempt from federal income tax under section 501 (c) (3) of the Internal Revenue Code, corresponding section of any future federal tax code. or (b) by an organization, contributions to which are deductible under section 170 (c) (2) of the Internal Revenue Code, or corresponding section of any future federal tax code.

Upon the dissolution of the organization, assets shall be distributed for one or more exempt purposes within the meaning of 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 the 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 the purposes or to such organization or organizations, as said court shall determine, which are organized and operated exclusively for such purposes.



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Phone:(503)986-2200 Fax:(503)378-4381 www.filinginoregon.com Registry Number: 364849-96 Date of Incorporation: 06/07/2006

Type: DOMESTIC NONPROFIT CORPORATION

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OREGON SECRETARY OF STATE

RE: BROOKLYN ACTION CORPS

APPLICATION FOR REINSTATEMENT/REACTIVATION

Please complete and return this letter and any enclosed documents for filing the requested reinstatement/reactivation.

Submit \$100 for the required fees.

The above entity hereby requests to be active on the records of the Corporation Division. The effective date of administrative dissolution is 08/03/2007

The reason(s) for administrative dissolution has been eliminated or did not exist.

By: Date: 11 6 2007

Any fees submitted with this document are non refundable and will be held for 45 days. If the document is returned for filling within 45 days no additional fees will be due unless otherwise stated in this letter.

Business Registry Corporation Division (503) 986-2200

> 38-8-1 11-13-07 \$100

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