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(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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(Business Entity Name)

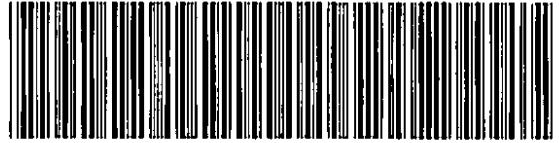
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TALLAHASSEE, FLORIDA

10-8-27



**FLORIDA DEPARTMENT OF STATE**  
**Division of Corporations**

July 18, 2022

**EGLISE VODOU D'AYITI**  
**P.O. BOX 518**  
**FITCHBURG, MA 01420-9998**

**SUBJECT: EGLISE VODOU D'AYITI**  
**Ref. Number: W22000093937**

2022 JUL 19 20

We have received your document for **EGLISE VODOU D'AYITI** and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of the entity and other information must be composed or comprised solely of letters, numerals, characters, or symbols found on a standard American or U.S. qwerty keyboard. Please amend the document accordingly.

The name must contain a word that will clearly indicate that it is a corporation. This word may be: **CORPORATION**, **CORP.**, **INCORPORATED**, or **INC.** Sections 617.0401(1)(a) and 617.1506(1), Florida Statutes, prohibits the use of the word **COMPANY** or **CO.** in the name of a non-profit corporation.

Please return the corrected 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) 245-6052.

**Tyrone Scott**  
**Regulatory Specialist II**  
**New Filings Section**

**Letter Number: 922A00015955**

[www.sunbiz.org](http://www.sunbiz.org)

**Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314**

## COVER LETTER

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

**SUBJECT:** EGLISE VODOU D'AYITI, 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 of  
Status

\$78.75  
Filing Fee  
& Certified Copy

\$87.50  
Filing Fee,  
Certified Copy  
& Certificate

**ADDITIONAL COPY REQUIRED**

**FROM:** Raymonde Jean-Baptiste  
Name (Printed or typed)

915 N.E. 199th Street, Apt.203  
Address

Miami, FL. 33179  
City, State & Zip

786-566-8979  
Daytime Telephone number

mondic01@gmail.com  
E-mail address: (to be used for future annual report notification)

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

**ARTICLES OF INCORPORATION**  
In compliance with Chapter 617, F.S., (Not for Profit)

**ARTICLE I NAME**

The name of the corporation shall be: EGLISE VOUDOU D'AYITI, INC.

**ARTICLE II PRINCIPAL OFFICE**

Principal <u>street</u> address: <u>348 Rollstone Street</u> <u>Floor 2</u> <u>Fitchburg, MA 01420</u>	Mailing address, if different is: <u>P.O. Box 516</u> <u>Fitchburg, MA 01420-9998</u>
-----------------------------------------------------------------------------------------------------------------	---------------------------------------------------------------------------------------------

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: The mission of the Voudou D'Ayiti Church is to merge our way of life with the academic and technical competence of this generation, to achieve the well-being of Haiti and the whole world, a religiously viable community of faith, spiritually strong, socially respected, mentally balanced and intellectually structured.

**ARTICLE IV MANNER OF ELECTION** The manner in which the directors are elected and appointed: appointed

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: <u>President: Marie-Lourdes Jean Pierre</u> Address: <u>348 Rollstone Street</u> <u>Floor 2</u> <u>Fitchburg, MA 01420</u>	Name and Title: <u>Vice-President: Serge Jarbath</u> Address: <u>348 Rollstone Street</u> <u>Floor 2</u> <u>Fitchburg, MA 01420</u>
Name and Title: <u>Secretary: Raymonde Jean-Baptiste</u> Address: <u>915 N.E. 199th Street</u> <u>Apt. 203</u> <u>Miami, FL 33179</u>	Name and Title: <u>Treasurer: Marah L. Jean Pierre</u> Address: <u>348 Rollstone Street</u> <u>Floor 2</u> <u>Fitchburg, MA 01420</u>
Name and Title: _____ Address: _____	Name and Title: _____ Address: _____

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address \_\_\_\_\_ Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address \_\_\_\_\_ Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

The **name and Florida street address** (P.O. Box NOT acceptable) of the registered agent is:

Name: Raymonde Jean-Baptiste

Address: 915 N.E. 199th Street, Apt. 203

Miami, FL. 33179

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**ARTICLE VII INCORPORATOR**

The **name and address** of the Incorporator is:

Name: Serge Jarbath

Address: 348 Rollstone Street, Floor 2

Fitchburg, MA 01420

**ARTICLE VIII EFFECTIVE DATE:** 06/05/2022

Effective date, if other than the date of filing: \_\_\_\_\_ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

*Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity*

*R. Baptiste*

Required Signature of Registered Agent

9/26/2022  
Date

*I submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.*

*S. Jarbath*  
Required Signature of Incorporator

9/29/2022  
Date