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COVER LETTER

TO:	Division of Corporations				
SURI	FCT. Harambee	Community Development Corp	oration		•
SODO	ECT	Name of Corporation	on – must inc	clude suffix	
Dear S	Sir or Madam:				
Affair	s in Florida", "Ce	ion by Foreign Not for Profi rtificate of Existence", or "C enced not for profit corporat	Certificate of	Status" and ch	eck are submitted to
Please	return all corresp	oondence concerning this ma	itter to the fo	llowing:	
	Larry M	. Walker, Jr.			
		. Name o	f Person		
	4-Sereni	ty, Inc.			
	 	Firm/C	Company		
	PO Box	390428			
				<u> </u>	
		Ade	dress		
	Snellvill	e, GA 30039			
		City/State a	nd Zip Code		
	lwalker@	4-serenity.com			
	E-m	nail address: (to be used for	future annua	l report notifica	ition)
For fu	rther information	concerning this matter, plea	se call:		
Dr. L	isa M. Wilson-Tait	at (770	356-0101	
	Name o	of Person	Area Code	Daytime Tel	ephone Number
	MAILING AD Registration Se Division of Cor P.O. Box 6327 Tallahassee, FL	ction porations		Registration S Division of Co Clifton Buildi	orporations ng ve Center Circle
Enclos	sed is a check for	the following amount:			
□ \$70	0.00 Filing Fee	□\$78.75 Filing Fee & Certificate of Status		Filing Fee & ed Copy	■ \$87.50 Filing Fee, Certificate of Status & Certified Copy

APPLICATION BY FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN FLORIDA

IN COMPLIANCE WITH SECTION 617.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN THE STATE OF FLORIDA:

Harambee Co	mmunity Develo	pment Corporation				
import in langua	àge as will clearly	ude the word "INCORPORA" y indicate that it is a corporati y" or "Co." may not be used a	ion instead of a r	natural person or partnership	if not so containe	i
Harambee CDC	C of Georgia Inco	rporated		, , ,		
(If name unava	ailable in Florida,	, enter alternate corporate nar	ne adopted for t	ne purpose of transacting bus	iness in Florida)	
2. Georgia			3. <u>25-1792206</u>			
(State or cour	ntry under the lav	w of which it is incorporated)		(FEI number, if applicable)		
4. 01/11/2007	·	•	5 N/A			
·· (1	Date of Incorpora	ition)	J. (D	ate of duration, if other than	perpetual)	
5. N/A						
(Date first cond	ucted affairs in Pl	orida if prior to registration. So	ee sections 617.1	501 & 617.1502, F.S. to deter	mine penalty liabii	ity.)
7. 5238 Ashley I	Drive, SW	Lilburn, GA 30047				
/. 		•	l office address)			
		/Cumont mailie	ig address, if dif	aren N		
		(Curent mann	ig address, it dit	icicii)	****	
0	.1		:c	1 IDC C+ 501/->/2)	<u> </u>	1
3. Organized exc	insively for char	itable, educational and scient	inc purposes un	uer IRC Section 501(C)(5).		
(Furpose(s) of	corporation audic	of ized in nome state of country	ry to be carried t	out in the state of Fiorida)	7	ال 10 : الم
9. Name and <u>str</u>	eet address of F	Florida registered agent: (F	P.O. Box <u>NOT</u>	acceptable)	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	<u>:</u> ــــــــــــــــــــــــــــــــــــ
	•				211	-
Name:	Henry Fuller, Jr	:•				
Office Address:	318 Lakeview	Drive, Suite 203				
	Weston		, Florida	33326	57	
		(City)	, rionua "	(Zip Code)		
		•				
10. Registered	l agent's accep	tance:		فيد في في م		
Having been no Jesionated in th	imed as registe	red agent and to accept so I hereby accept the appoi	ervice of proce intment as rec	ss for the above stated col istered agent and agree to	poration at the	place icity. I
further agree to	o comply with ti	he provisions of all statut	es relative to ti	he proper and complete pu	rformance of n	ıy -
duties, and I an	n familiar with	and accept the obligation	is of my position	on as registered agent.		
	/					
	X		<i>MT</i>			
		(Register)	ed agent's signati	re)	<u></u>	
				·		
11. Attached is	a certificate of	existence duly authentica	ted, not more t	han 90 days prior to delive	ry of this applic	ation to
the Departm	nent of State, by	y the Secretary of State or of which it is incorporated	o mer official l	naving custody of corporat	e records in the	
Jan isanction	juniaci ale izw	or where it is involvered	J.			

A. DIRECTORS

Chairma	Lisa Wilson-Tait	
Address	5238 Ashley Drive, SW	
	Lilburn, GA 30047	
Vice Ch	Roxanne Aguillard	
Address	504 Bruin Court	
	Stockbridge, GA 30281	
Director	Kiara Adams	·
Address	1 Dancer Ct	
	Owings Mills, MD 21117	
Director	Sharon Walters	
Address	4338 Pinefiled Court	16
	Randallstown, MD 21133	
B. OF	TFICERS	9 1
Presiden	Henry Fuller, Jr.	AH 0
Address	318 Lakeview Drive, Suite 203	57
	Weston, FL 33326	
Vice Pre	Lisa Wilson-Tait	
Address:	5238 Ashley Drive, SW	
	Lilburn, GA 30047	
Secretar	Nathan Cohen	
Address	5238 Ashley Drive, SW, Lilburn, GA 30047	
Treasure	Larry Walker, Jr.	
Address:	2775 Trotters Walk Trl, Snellville, GA 30078	
NOTE:	If necessary, you may attach an addendum to the application listing at (Signature of Chairman, Vice Chairman, or any officer listed in nur	
, Lis	sa Wilson-Tait	

(Typed or printed name and capacity of person signing application)

Control Number: 07016444

STATE OF GEORGIA

Secretary of State

Corporations Division
313 West Tower
2 Martin Luther King, Jr. Dr.
Atlanta, Georgia 30334-1530

CERTIFICATE OF EXISTENCE

I, Brian P. Kemp, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

HARAMBEE: COMMUNITY DEVELOPMENT, CORPORATION:

a Domestic Nonprofit Corporation

was formed in the jurisdiction stated below or was authorized to transact business in Georgia on the below date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official/Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

Docket Number
Date Inc/Auth/Filed
Jurisdiction
Print Date
Form Number

: 13581635 : 01/11/2007 : Georgia : 11/23/2016 : 211



Brian P. Kemp Secretary of State