

F00000003864

TO: Qualification/Registration Section
Division of Corporations

SUBJECT: Student Fellowship For Blacks, Inc.
(Name of Corporation)

300003305183--7
-06/26/00--01147--007
*****70.00 *****70.00

Dear Sir or Madam:

The enclosed "Application by Foreign Not for Profit Corporation for Authorization to Conduct its Affairs in Florida", "Certificate of Existence", and check are submitted to register the above referenced not for profit corporation to conducts its affairs in Florida.

Please return all correspondence concerning this matter to the following:

Carl W. Holifield
(Name of Person)
Student Fellowship For Blacks, Inc.
(Firm/Company)
P. O. Box 18107
(Address)
Indianapolis, Indiana 46218
(City, State and Zip Code)

FILED
00 JUL 10 PM 5: 00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Carl Holifield at (317) 549 - 316600-3864
(Name of Person) Area Code & Daytime Telephone Number

STREET ADDRESS:
Qualification/Tax Lien Section
Division of Corporations
409 E. Gaines St.
Tallahassee, FL 32399

MAILING ADDRESS:
Qualification/Tax Lien Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

☒ \$70.00 Filing Fee ☒ \$78.75 Filing Fee & Certificate of Status ☐ \$78.75 Filing Fee & Certified Copy ☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

June 28, 2000

CARL HOLIFIELD
P.O. BOX 18107
INDIANAPOLIS, IN 46218

SUBJECT: STUDENT FELLOWSHIP FOR BLACKS, INC.
Ref. Number: W00000016499

We have received your document for STUDENT FELLOWSHIP FOR BLACKS, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The date first transacted business in Florida within the meaning of s. 607.1501 or 608.501, F.S., must be set forth in section 6 of the application. If the corporation/limited liability company has not yet transacted business in Florida within this meaning, please insert the words "upon qualification" in lieu of a date. (Note: Pursuant to s. 607.1502(4), F.S., this office collects a civil penalty of \$1000 for each year other than the application filing year, that a foreign corporation or limited liability company transacts business in this state without authority along with the past annual report/uniform business report fees due this office.)

Please return 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) 487-6020.

Tammi Cline
Document Specialist

Letter Number: 600A00036565

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

00 JUL 10 PM 5:00

FILED

**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:*

1. Student Fellowship For Blacks, Inc.

(Name of corporation: must include the word "INCORPORATED" or "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present. "Company" or "Co." may not be used as a corporate suffix by a nonprofit corporation.)

2. Indiana

(State or country under the law of which it is incorporated)

3. 31-0908340

(FEI number, if applicable)

4. April 23, 1985

(Date of Incorporation)

5. Perpetual

(Duration: Year corp. will cease to exist or "perpetual")

6. Upon qualification, in lieu of a date

(Date corporation first conducted Affairs in Florida -
See sections 617.1501, 617.1502, and 817.155, F.S.)

7. _____

P.O. Bx. 18107 Indianapolis, In. 46218

(Current mailing address)

8. Give grants to students for college.

(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)

9. Name and street address of Florida registered agent:

Rita J. Mitchell

(Name)

3917 Heath Circle South

(Office address)

West Palm Beach, Florida, Fla. 33407

(City)

(Zip Code)

10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Rita J. Mitchell

(Registered agent's signature)

FILED
00 JUL 10 PM 5:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and addresses of officers and/or directors: (Street address only- P. O. Box NOT acceptable)

A. DIRECTORS (Street address only- P. O. Box NOT acceptable)

Chairman: Carl Holifield

Address: 5518 E. 34th ST.

Indianapolis, IN. 46218

Vice Chairman: _____

Address: _____

Director: Stella Kelly

Address: 2938 Winthrop Av.

Indianapolis, IN. 46205

Director: Howard Holifield

Address: 3420 N. Layman Ave.

Indianapolis, IN. 46218

B. OFFICERS (Street address only- P. O. Box NOT acceptable)

President: Carl Holifield

Address: 5518 E. 34th ST.

Indianapolis, IN. 46218

Vice President: _____

Address: _____

Secretary: Margaret Bush

Address: 9613 Spruce Ln. Fisher, IN. 46038

Treasurer: Danita Hoskin

Address: 1121 N. Tecumseh Indianapolis, IN. 46201

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. Carl W. Holifield

(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

CARL W. HOLIFIELD / Chairman

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

FILED
00 JUL 10 PM 5:00
SECRETARY OF STATE
INDIANAPOLIS, INDIANA

**STATE OF INDIANA
OFFICE OF THE SECRETARY OF STATE
CERTIFICATE OF EXISTENCE**

To Whom These Presents Come, Greeting:

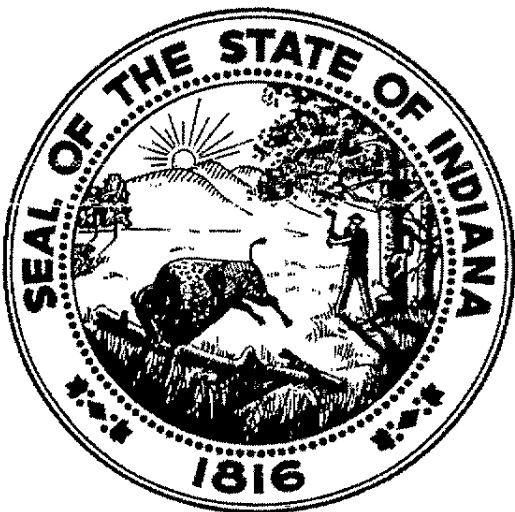
I, SUE ANNE GILROY, Secretary of State of Indiana, do hereby certify that I am, by virtue of the laws of the State of Indiana, the custodian of the corporate records and the proper official to execute this certificate.

I further certify that records of this office disclose that

STUDENT FELLOWSHIP FOR BLACKS INC

duly filed the requisite documents to commence business activities under the laws of the State of Indiana on April 23, 1985, and was in existence or authorized to transact business in the State of Indiana on June 13, 2000.

I further certify this Non-Profit Domestic Corporation has filed its most recent report required by Indiana law with the Secretary of State, or is not yet required to file such report, and that no notice of withdrawal, dissolution or expiration has been filed or taken place.



In Witness Whereof, I have hereunto set my hand
and affixed the seal of the State of Indiana, at the
City of Indianapolis, this Thirteenth Day of June, 2000.

Sue Anne Gilroy

SUE ANNE GILROY, Secretary of State