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PICK-UP	☐ WAIT	MAIL MAIL
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TRANSMITTAL LETTER

TO: Registration Section Division of Corporations
LIAITIAN AMEDICAN I EADEDOUID COLINICII
SUBJECT: Name of Corporation – must include suffix)
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 conduct its affairs in Florida.
Please return all correspondence concerning this matter to the following:
Emmanuel Coffy, MSEE, JD
(Name of Person)
700
(Firm/Company)
5 Churchill Court 岩口 コープログランド
(Address)
Morganville, NJ 07751 (City/State and Zip Code)
(City/State and Zip Code)
For further information concerning this matter, please call:
Emmanuel Coffy at (732) 617-7706
Emmanuel Coffy at (732) 617-7706 (Name of Person) (Area Code & Daytime Telephone Number)
STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399 MAILING ADDRESS: Registration Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314
Enclosed is a check for the following amount:
Ø \$70.00 Filing Fee

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. HAIHAN-	AMERICAN LEADERSHIP C	OOMCIL	_, INC.			
in language as v	oration: must include the word "INCOR vill clearly indicate that it is a corporate any" or "Co." may not be used as a co	ion instead	of a natural person or p	artnership if not	breviations of like so contained in the	import name at
2. CONNEC	TICUT	3	75-3139304			
(State or count	ry under the law of which it is incorpor	ated)		FEI number, if a	oplicable)	
4. Dec 4, 20	003	5.	Perpetual			
**	(Date of Incorporation)		(Duration: Year co	rp. will cease to	exist or "perpetual	n)
D. •	ion has not conducted affairs					
(Date cor	poration first conducted Affairs in Flor	rida - See s	ections 617.1501, 617.1	502, and 817.15	5, F.S.)	
7. 975 Mix	Ave. Suite 2F HAMDEN, CT	06514				
	•	rincipal of	fice address)			
same as						
	(0	Jurrent mai	lling address)			
s civic bett	terment, defend the legal righ	ts of Hai	itian-American and	d promote as	similation.	
o	(Purpose(s) of corporation authorized	in home st	ate or country to be carr	ied out in the sta	te of Florida)	
9. Name and str	reet address of Florida registered	l agent: ()	P.O. Box or Mail Dro	p Box NOT ac	ceptable)	
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						
Name:	Mr. Dumesie Joseph				4 PEFF	
Office Address:	6721 Southwest 3rd Street				JAH I	
	Margate		, Florida 33068		2 A	
·	(City)	-		(Zip Code)	77.5	U
Having been designated in I further agn	agent's acceptance: named as registered agent and to this application, I hereby accept t ee to comply with the provisions o am familiar with and accept the ol	he appoin f all statu	itment as registered a tes relative to the pro	igent and agree per and compl	e to act in this ca	pacity.
	Du	nuls gistered ag	Lo Topey ment's signature)	il_	-	

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:

A. DIKI	CIONS			
Chairman	Emmanuel Coffy, MSEE, JD			
Address:_	5 Churchill Court, Morganville NJ 07751			
Vice Chai	man. Francky Louis	5.†		_
Address:_	1005 Black Oak Court, Fredericksburg, VA 22401			 -
Director:_	Dieudonne Antoine			
Address:_	975 Mix Ave., Suite 2F HAMDEN, VT 06514			
	Fred Valery			
Address:_	3873 Orloff Ave., Suite 7K Bronx, NY 10463	 		
B. OFF	ICERS	SE(유	
President:	Francky Louis	<u> </u>	<u> </u>	- Artis
Address:_	same as above	ASSI		
-	Dioudonna Antoina	EE FL	A- 10:	
	same as above	- GR	- 07	
Address:_		7,		
Secretary	Dieudonne Antoine			
Address:_	same as above			
Treasurer	Fred Valery			
Address:_	same as above			
NOTE:	If necessary, you may attach an addendum to the application listing additional officers an	d/or dire	ctors.	
13.—	(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the ap	plication)	
14E	mmanuel Coffy, MSEE, JD			
	(Typed or printed name and capacity of person signing application)			

Office of the Secretary of the State of Connecticut

I, the Connecticut Secretary of the State, and keeper of the seal thereof, DO HEREBY CERTIFY, that

HAITIAN-AMERICAN LEADERSHIP COUNCIL INC. (HALEC)

incorporated under the laws of Connecticut is in existence. The organization and first annual report has not been filed as of the date shown below.

Secretary of the State

Date Issued: December 4, 2003

OL JAN 12 AM 10: 07
SECHELISKY CESTABLE AT TALLAHASSEE, FLORIDA