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TRANSMITTAL LETTER

TO: Registration Section Division of Corporations				
SUBJECT: ISLAMIC CENTER OF MICHIGAN CITY, INDIANA, INCORPORATED				
(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:				
JAMAL AGEMY				
(Name of Person)				
ISLAMIC CENTER OF MICHIGAN CITY				
(Firm/Company)				
428 BLACK OAK DRIVE				
(Address)				
MICHIGAN CITY, IN 46360				
(City/State and Zip Code)				
MICHIGAN CITY, IN 46360 (City/State and Zip Code) For further information concerning this matter, please call:				
JAMAL M. AGEMY $at (219) 878-9126$				
(Name of Person) (Area Code & Daytime Telephone Number)				
STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399 Enclosed is a check for the following amount: MAILING ADDRESS: Registration Section Division of Corporations Division of Corporations P. O. Box 6327 Tallahassee, FL 32314				
\$70.00 Filing Fee \$\Boxed{\sigma}\$ \$78.75 Filing Fee & \$\Boxed{\sigma}\$ \$78.75 Filing Fee & \$\Boxed{\sigma}\$ \$87.50 Filing Fee, Certificate of Status & Certified Copy 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:

	ENTER OF MICHIGAN CITY INDIANA, INC	
(Name of corporation in the name at p	oration: must include the word "INCORPORATI age as will clearly indicate that it is a corporation present. "Company" or "Co." may not be used as	D" or "CORPORATION" or words or abbreviations of like in instead of a natural person or partnership if not so contained a corporate suffix by a nonprofit corporation.)
2. INDIANA	3.	
	intry under the law of which it is incorporated)	(FEI number, if applicable)
4. MAY 15, 192	24 5	Perpetual
	Date of Incorporation)	(Duration: Year corp. will cease to exist or "perpetual")
6		
(Date first cond	lucted affairs in Florida if prior to registration. See	sections 617.1501 & 617.1502, F.S., to determine penalty liability.)
7 P.O. BOX 71	IO, MICHIGAN CITY, INDIANA ♣6361	
, <u></u>		ffice address)
428 BL ACK (OAK DRIVE, MICHIGAN CITY, INDIANA 46	2360
420 BLACK (nailing address)
	,	<u> </u>
R To instill in its	s members a greater interest in educational,	religious and American institutions and practices. Stop to be carried out in the state of Florida) D. Box NOT acceptable)
(Purpose(s) of	corporation authorized in home state or country	to be carried out in the state of Florida)
O Nama and at-	reet address of Florida registered agent: (P.C	Per NOT constable)
3. Ivanie and <u>su</u>	rect address of Florida registered agent. (F.C	box Mot acceptable)
.	HANA HAKIM	
Name:	HANA HANIW	— <u> </u>
Office Address	9319 TIBET POINTE CIRCLE	· · · · · · · · · · · · · · · · · · ·
Office Address.		— P
	WINDERMERE	_, Florida _34786
	(City)	(Zip Code)
10 8 14	.	
10. Registere Having heen ni	d Agent's acceptance: amed as registered agent and to accept serv	ice of process for the above stated corporation at the place
designated in th	his application, I hereby accept the appoint	ment as registered agent and agree to act in this capacity. I
further agree to and I am famil	o comply with the provisions of all statutes i lar with and accept the obligations of my pe	relative to the proper and complete performance of my duties osition as registered agent.
	iai viiiv aisa accopi isic obilganosis oj sig pi	and the second and and the second
		α
		///:
	fan f	
	(Registered	Aent's signature)

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. DIRECTORS

Chairman:_	1.) BOARD DIRECTOR: HUSSIEN MROUEH
Address:	701 HOYT STREET
_	MICHIGAN CITY, IN 46360
Vice Chairr	nan: 2.) BOARD DIRECTOR: BRAHIM HAKIM
Address:	241 W. COOLSPRING
-	MICHIGAN CITY, IN 46360
Director: 3	.) BOARD DIRECTOR: SAMER AGEMY
Address:	122 LAWNDALE PLACE
	MICHIGAN CITY, IN 46360
Director:	4.) BOARD DIRECTOR: JABER DABAGIA
Address:	2813 GREENWOOD AVE.
	MICHIGAN CITY, IN 46360
B. OFFI	CERS
President:_	HUSSIEN HAKIM
Address: 7	525 W. 125N.
<u>L</u>	APORTE, IN 46350 E. 2 7
Vice Presid	ent: TAGHI ARSHAMI
Address: 6	409 CLEVELAND STREET
М	ERRILLVILLE, IN 46410
Secretary:_	JAMAL AGEMY
Address: 4	28 BLACK OAK DRIVE, MICHIGAN CITY, IN 46360
Treasurer:_	JAMAL AGEMY
Address: 42	28 BLACK OAK DRIVE, MICHIGAN CITY, IN 46360
13	necessary, you may attach an addendum to the application listing additional officers and/or directors. Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)
14. <u>JAMAI</u>	L AGEMY, PREASURER/SECRETARY (Typed or printed name and capacity of person signing application)

*ADDENDUM

5.) PHIL DABAGIA 6605 N. 600 W. MICHIGAN CITY, IN 46360

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

To Whom These Presents Come, Greetings:

I, TODD ROKITA, 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 proper official to execute this certificate.

I further certify that records of this office disclose that

THE ISLAMIC CENTER OF MICHIGAN CITY INDIANA INC

duly filed the requisite documents to commence business activities under the laws of State of Indiana on May 15, 1924, and was in existence or authorized to transact business in the State of Indiana on March 10, 2005.

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 Tenth Day of March, 2005.

TODD ROKITA, Secretary of State

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