H-05000000008/2

(Requestor's Name) (Address) (Address) (City/State/Zip/Phone #) PICK-UP ☐ WAIT MAIL (Business Entity Name) (Document Number) Certified Copies ___ Certificates of Status Special Instructions to Filing Officer:

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TRANSMITTAL LETTER

FILED

TO: Registration Section	2005 MAY -4 P 12: 33
. Division of Corporations	SECRETARY OF STATE
SUBJECT: SEIF ESTEEM INCO (Name of Corporation – must include s	REPORA TELYA
Dear Sir or Madam:	
The enclosed "Application by Foreign Not for Profit Corporation for Ar Affairs in Florida", "Certificate of Existence", and check are submitted not for profit corporation to conduct its affairs in Florida.	
Please return all correspondence concerning this matter to the following	g:
LAGIENDA REEN (Name of Person)	
SEIF ESTEEM INC	preparated
POBOX 823452	
16722 S.W. 12TH PEMBEOKE PINES F (City/State and Zip Code))	STREET
PEMBROKE TINES F (City/State and Zip Code))	L 33082
For further information concerning this matter, please call:	
LA CLENDA REED at (954) 88 (Area Code & Day	35-6531 time Telephone Number)
Registration Section Regist Division of Corporations Division 409 E. Gaines St. P. O. I	LING ADDRESS: tration Section on of Corporations Box 6327 tassee, FL 32314
Enclosed is a check for the following amount:	
\$70.00 Filing Fee Status S78.75 Filing Fee & S78.75 Filing Fee 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 ! FOR REGISTER A FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN
THE STATE OF FLORIDA:
THE STATE OF FLORIDA: 1. SEF ESTEW TO 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. KENTUCKY (State or country under the law of which it is incorporated) 3. 61-1234342 (FEI number, if applicable)
4. Avoyst 25, 1992 5. PEROFTUA (Duration: Year corp. will cease to exist or "perpetual")
6. (Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S, to determine penalty liability.)
7. LA GIENDA REED (Principal office address)
POBOX 823452 PEMBEOKE PINES, F1 33082
8. SEF ESTEEM TRAINGING TRAINGING TRAINGING TRAINGING TO RUY SEIL (OR) LEAST
9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) PROPERTY AND LAND
Name: LA GIENDA REEN Office Address: 16722 S.W. 12TH STREET
Office Address: 16722 S.W. 12TH STREET
PEMBROKE PINES, Florida 33027 (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.
La Loud Copy 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	, מ מניין
Chairman: LA GIENDA REJEL	FILED
Address: 16722 S. W. 12TH STREET	
PENDROKE PENER, FL 33027 Vice Chairman: NONE Appointed At this time.	
Vice Chairman: NONE Apponted At this time!	ALLAHASSEE, FLORI
Address:	
Director: Jo ANN MCCALL	
Address: 538 EAST (iberty 39	<u> </u>
Louisville, Ky 40202	
Director: ANDRE CHANDIER	
Address: 1306 ROSEWEL	
LOUISVITE, KY 4021/	
B. OFFICERS	
President: WA/tER T. Cosby	
Address: 1259 LIVE OAK DRIVE	
LOUISVILLE, KY 40243	
Vice President: Alphonzo BROWN	
Address: 1600 WEST BRECKINEIDGE	
Louisville, Ky 40210	
Secretary: HOWARD OWERS	
Address: 2120 Algonaut Pkwy Louisi	11/E, KY 402,
Treasurer: MAC SHAW	77
Address: 5102 QuAil Covet 72 Louis VIII6,	KY 4021-
NOTE: If pecessary, you may attach an addendum to the application listing additional officers and/o	or directors.
13 had and Panks	
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the applicat	ion)
14. LA GIENDA KEEL (Typed or printed name and canacity of person signing application)	



Trey Grayson Secretary of State

Certificate of Existence

I, Trey Grayson, Secretary of State of the Commonwealth of Kentucky, do hereby certify that according to the records in the Office of the Secretary of State,

SELF-ESTEEM INC.

has eliminated all the grounds for dissolution, paid all fees and penalties owed to the Secretary of State, and met all other requirements for reinstatement. The effective date of reinstatement is March 21, 2005.

I further certify that SELF-ESTEEM INC. is a corporation duly incorporated and existing under the laws of the Commonwealth of Kentucky, whose date of incorporation is August 25, 1992, and whose period of duration is perpetual.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my Official Seal at Frankfort, Kentucky, this 21st day of March, 2005.



Trey Grayson
Secretary of State
Commonwealth of Kentucky
MMcCulloh/0304466