06926

· ____ ·

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		
Office Use Only		

_



11/22/05--01062--001 **78.75



A DRYAN NOV 3 U 2005

PINS HON 22 PH 3: 42

COVER LETTER

TO: **Registration Section Division** of Corporations

SUBJECT: One Economy Corporation

(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.

Pl

Please return all correspondence concerning this matter	to the following:	
Bennett H	lecht	
(Name of Pe	erson)	
One Economy Corporation (Firm/Company)		
(Firm/Com)	pany)	
1220 19th Street, NW Suite 610		
(Addres	s)	
Washington, D.C. 20036		
(Ĉity/State and Zip Ĉode)		
For further information concerning this matter, please ca	all:	
Constance Nwosu	202 3558-3801	
(Name of Person) (An	202) 558-3801 rea Code & Daytime Telephone Number)	
MAILING ADDRESS: Registration Section	STREET/COURIER ADDRESS: Registration Section	

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Division of Corporations **Clifton Building** 2661 Executive Center Circle Tallahassee, FL 32301

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

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. One Economy Corporation (Name of corporation: must include the word "INCORPORATE import in language as will clearly indicate that it is a corporation in the name at present. "Company" or "Co." may not be used as	D" or "CORPORATION" or words or abbreviations of like n instead of a natural person or partnership if not so contained a corporate suffix by a nonprofit corporation.)	
2. District of Columbia 3.	52-222052	
(State or country under the law of which it is incorporated)	(FEI number, if applicable)	
4. <u>02/16/2000</u> 5. (Date of Incorporation)	perpetual (Duration: Year corp. will cease to exist or "perpetual")	
6 April 2004	sections 617.1501 & 617.1502, F.S, to determine penalty liability.)	
7 1220 19th Street NW, Suite 610, Washington, D. C. 20036		
(Principal office address)		
1220 19th Street NW, Suite 610, Washington, D. C. 20036		
(Current mailing address)		
8. Community Service (Purpose(s) of corporation authorized in home state or country	to be carried out in the state of Florida)	
9. Name and <u>street address</u> of Florida registered agent: (P.O. Box <u>NOT</u> acceptable)		
Name: Catherine Colmenares		
Office Address: 858 W Flagler Street	FLORING 12	
Miami	_, Florida 33130	
(City)	(Zip Code)	

10. Registered agent's acceptance:

ā

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.

(Registered agent'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

. . .

á

.

Chairman: Reynard Ramsey	
Address: 1220 19th Street, NW, Suite 610	
Washington, D.C. 20036	
Vice Chairman:	<u> </u>
Address:	TALL BE T
	MAC NO L
Director:	SSEE
Address:	FUR S
	RIDAN
Director:	
Address:	
B. OFFICERS	
President: Bennett L. Hecht	
Address: 1220 19th Street, NW, Suite 610	
Washington, D.C. 20036	<u> </u>
Vice President:	
Address:	
Secretary:	
Address:	
Treasurer:	
Address:	
NOTE: If necessary, you may attach an addendum to the application listing additional officer	s and/or directors.
13. (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the a	pplication)
14. Bennett L. Hecht, President and Chief Operating Officer	·

•

· ___

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

GOVERNMENT OF THE DISTRICT OF COLUMBIA

DEPARTMENT OF CONSUMER AND REGULATORY AFFAIRS



CERTIFICATE



THIS IS TO CERTIFY that there were received and accepted for record in the Department of Consumer and Regulatory Affairs, Corporations Division, on the **17th** day of **February**, **2000** *Articles of Incorporation of:*

ONE ECONOMY CORP

The above named corporation is duly incorporated and existing pursuant to and by virtue of the Nonprofit Corporation Act of the District of Columbia and authorized to **conduct its affairs** in the District of Columbia as of the date mentioned above.

WE FURTHER CERTIFY that the above entitled corporation is at the time of issuance of this certificate in <u>Good Standing</u>, according to the records of the Corporations Division, having filed all reports required by the District of Columbia Nonprofit Corporation Act.

IN TESTIMONY WHEREOF I have hereunto set my hand and caused the seal of this office to be affixed this **10th** day of **November**, **2005**.

Patrick J. Canavan, Psy. D. Director Neil Stanley Administrator Business and Professional Licensing Administration

Patricia E. Grays Superintendent of Corporations Corporations Division