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COVER LETTER

TO: New Filing Section Division of Corporations
SUBJECT: ORLEANS COMMUNITY HOUSING DEVELOPMENT 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.
Please return all correspondence concerning this matter to the following:
PETER WAXMAN (Name of Person)
ORLEANS COMMUNITY HOUSING DEVELOPMENT CORPORATION (Firm/Company)
609 JEFFERSON HIGHWAY (Address)
BATON RIVEE, UA 7080 6 (City/State and Zip Code)
For further information concerning this matter, please call:
PETER WAXMAN at (504) 232 6955 (Name of Person) (Area Code & Daytime Telephone Number)
MAILING ADDRESS: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301
Enclosed is a check for the following amount:
\$70.00 Filing Fee \$\begin{array}{ c c c c c c c c c c c c c c c c c c c

APPLICATION BY FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN FLORIDA

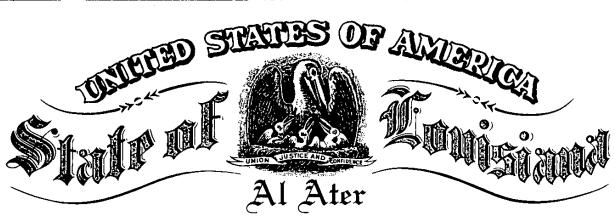
IN COMPLIANCE WITH SECTION 617.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN THE STATE OF FLORIDA:

1. ORUGANS COMMUNTY HOUSING DEVELOPMENT CORPORATION (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. Lovisiano 3. (State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 1994 5. Paraton: Year corp. will cease to exist or "perpetual") 6. N/A
(Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S., to determine penalty liability.) 7. 609 JEFFERSON HIGHWAY BATON RUGE, 109 70806 (Principal office address)
844 BARONNE STREET NEW ORLEANS, LA 70113 (Current mailing address)
8. Community Hovsing Development Organization. Access to AGGROABLE Hovsing (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: PETER WAXMAN Office Address: 1720 HARRISON ST. #14D Laccommon Florida 32070
Houywood, Florida 33000 (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.

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. DIRECT	UKS
Chairman:	LISA WAXMAN
Address:	609 JEFFERSON HIGHWAY BATON ROVER, LA 70806
Vice Chairman	: MICHAOLTAYLOR
Address:	1160 CAMP STREET NEW ORLEANS, UT 70130
Director:	PETER WAXMAN
Address:	1720 HARRISON STREET HOLYWOOD, FL 33020
Director:	FARL BARNES
Address:	ZO PRIM ROSE LANE WAGGAMAN, LA 70094
B. OFFICE President: Address:	HENRY KLEIN 844 BARONNE STREET NEW ORLEANS, LA 70113
Vice President	
Address:	
Secretary:	EDWARD PEPPERMAN
Address:	4120 CATHERINE AVENUE, METAIRE, LA 7000
Treasurer:	DAWN NEWMAN 207 CLARK AVENUE MCCOMB MS 39648
Address:	207 CLARK HUGNUE MCCOMB MS 39648
13(S	gnature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)
14	TREASURER (Typed or printed name and capacity of person signing application)



SECRETARY OF STATE

As Secretary of State, of the State of Louisiana, I do hereby Certify that the Articles of Incorporation of

ORLEANS COMMUNITY HOUSING DEVELOPMENT CORPORATION

Domiciled at NEW ORLEANS, LOUISIANA,

Were filed in this Office and a Certificate of Incorporation was issued on April 30, 1993,

I further certify that no Certificate of Dissolution has been issued.

In testimony whereof, I have hereunto set my hand and caused the Seal of my Office to be affixed at the City of Baton Rouge on,

May 1, 2006

RRO 34433432N

Secretary of State

