F07000004236

(Requestor's Name)
(Address)
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:
•
i

Office Use Only



900108133289

08/20/07--01041--011 **70.00

2001 AUG 20 P 3: 28
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. WHATE NIG 22 200

COVER LETTER

TO: New Filing Section Division of Corporations		
SUBJECT: Ike Kligerman Barkley Architects	P.C.	
(Name of corporation - must include s		
Dear Sir or Madam:		
The enclosed "Application by Foreign Corporation for Authorization to "Certificate of Existence," and check are submitted to register the above transact business in Florida.		
Please return all correspondence concerning this matter to the following:		
Gavin S. Banta, Esq.		
(Name of Person)		
Angelo & Banta, P.A.		
(Firm/Company)		
515 East Las Olas Boulevard, Suite 850		
(Address)		
Fort Lauderdale, Florida 33301		
(City/State and Zip code)		
For further information concerning this matter, please call:		
Gavin S. Banta, Esq. _{at (} 954 ₎ 766-993	30	
(Name of Person) (Area Code & Daytime	· · · · · · · · · · · · · · · · · · ·	
STREET/COURIER ADDRESS: New Filing Section MAILING ADDRESS: New Filing Section		
•	·	
- · · · · · · · · · · · · · · · · · · ·	Tallahassee, FL 32314	
Enclosed is a check for the following amount:		
\$70.00 Filing Fee \$\bigcup \$78.75 Filing Fee & Certificate of Status \$78.75 Filing Fe		

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

	Kligerman Barkley				
	corporation; must include "INCOR	PORATED," "	COMPANY," "CORPORA"	HON," PSE	
ше., со., с	Corp," "Inc," "Co," or "Corp.")			CS	= 7
				三三	
				S A	~ I
(If name unavai	lable in Florida, enter alternate cor	porate name ado	pted for the purpose of transa	acting business in Fl	orida)
2. New			13-3694761	Fo	<u>_</u>
(State or country	under the law of which it is incorp	porated)	(FEI number, if	applicable)	28
4. Decem	ber 9, 1992	5.	Perpetual	F-	Œ,
(Date	of incorporation)		uration: Year corp. will ceas	se to exist or "perpe	tual")
6.	•				
	(Date first transacte	d business in Flo	orida, if prior to registration)		
	(SEE SECTIONS 607.15	501 & 607.1502,	F.S., to determine penalty lis	ability)	
7. 330 We	st 42nd St, 11th F	loor, New	York, New York	, 10036	
		al office address			
330 We.	st 42nd St, 11th F.	loor, New	York, New York	10036	
		mailing address			
	•	-	•	,	
8. Practi	ce the profession (of archit	ecture		
	s) of corporation authorized in hom			(Florida)	
	•		•	,	·
9. Name and stree	et address of Florida registered	agent: (P.O. B	ox NOT acceptable)		
Name:	Angelo & Banta,	D A			, J
. 1002-01	11119 LI W DG L G /	1.011.	-		, ,,,
Office Address:	515 East Las Olas	s Bouleva	rd, Suite 850		
	Park Isudardala		m. u. 33301		
•	Fort Lauderdale (City)		(Zip code)		٠
	(City)		(Zip code)		
10. Registered as	gent's acceptance:				
	ed as registered agent and to a	ccept service o	f process for the above sta	ited corporation a	t the place
designated in this	application, I hereby accept th	e appointm est	as registered agent and a	Free to act in this	capacity, I
further agree to co	omply with the provisions of all with and accept the obligation	l statutes Elati	ve to the proper and comp	olete performance	of my duties
and I am familiar	with and accept the obligation	s of ply positio	n as registered agent.		•
					•
_	(Registored agent's	signature)		**************************************	
					•
11. Attached is a contract the Department of	ertificate of existence dury auth State, by the Secretary of State	enticated, not a	nore than 90 days prior to	delivery of this ap	oplication to
					1

under the law of which it is incorporated.

12. Names and business addresses of officers and/or directors: A. DIRECTORS Chairman: John E. Ike Address: 17 Hickory Drive, Maplewood, New Jersey 07040 Vice Chairman: Address: _ Director: Thomas A. Kligerman Address: 14 Washington Park, Maplewood, New Jersey 07040 Director: Joel K. Barkley Address: 185 Jockey Hollow Road, Bernardsville, New Jersey 09724 B. OFFICERS President: John E. Ike Address: 17 Hickory Drive, Maplewood, New Jersey 07040 Vice President:

Secretary: Thomas A. Kligerman	
Address: 14 Washington Park, Maplewood, New Jersey 07040	
Treasurer: Joel K. Barkley	
Address: 185 Jockey Hollow Road, Bernardsville, New Jersey 09724	
·	

Address: __

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. (Signature of Director or Officer listed in number 12 of the application)

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

State of New York Department of State } ss:

I hereby certify, that the Certificate of Incorporation of IKE KLIGERMAN BARKLEY ARCHITECTS P.C. was filed on 12/09/1992, under the name of IKE & KLIGERMAN ARCHITECTS P.C., with perpetual duration, and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is an existing corporation.

A Certificate of Amendment IKE & KLIGERMAN ARCHITECTS P.C., changing its name to IKE KLIGERMAN BARKLEY ARCHITECTS P.C., was filed 12/17/1998.



200708160234 59

NO7000008254

(Re	questor's Name)	<u></u>
(,,,		
(Ad	dress)	
,	,	
(Ad	dress)	
·	•	
(Cit	ty/State/Zip/Phone	 e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
	Ü	
		i

Office Use Only



700103818567

06/06/07--01016--002 **78.75

ZOOT AUG 22 P 3: 39
SEURETARY OF STATE
ALLAHASSEF, FI OBIO A

D. WHITE AUG 22 2000.

COVER LETTER

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

SUBJECT:	The House of Emmanuel Inc.			
	(PROPOSED CORPORATE NAME – <u>MUST INCLUDE SUFFIX</u>)			
Enclosed is an original ar	nd one(1) copy of the Articl	es of Incorporation and	a check for:	
\$70.00 Filing Fee	**78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate	
		ADDITIONAL CO	PPY REQUIRED	
FROM:	Thomas L.		_	
	Name (Printed or typed)			
	11703 Grove Arcade Drive			
	Address			
	Riverveiw, Florida 33569-5593			
	City, Si	-		
	813 425-:			
	Daytime Telephone number			

NOTE: Please provide the original and one copy of the articles.



June 7, 2007

THOMAS PHILLIPS 11703 GROVE ARCADE DRIVE RIVERVIEW, FL 33569-5593

SUBJECT: PAL-A-DIN GROUP INC.

Ref. Number: W07000027192

We have received your document for PAL-A-DIN GROUP INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6933.

Dale White Document Specialist New Filing Section

Letter Number: 907A00038937



FLORIDA DEPARTMENT OF STATE Division of Corporations

August 15, 2007

THOMAS PHILLIPS 11703 GROVE ARCADE DRIVE RIVERVIEW, FL 33569-5593

SUBJECT: HOUSE OF EMMANUEL INC.

Ref. Number: W07000027192

We have received your document for HOUSE OF EMMANUEL INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Signatures are required.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your-filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6933.

Dale White Document Specialist New Filing Section

Letter Number: 907A00038937

OT AUG 22 M IC 32

OF ARTHERT OF STATE
DEPARTMENT OF STATE
DIVISION OF CORPORATION
TALL ANIASSEE, FLORIDA

ARTICLES OF INCORPORATION

In Compliance with Chapter 617, F.S., (Not for Profit)

ARTICLE I NAME

The name of the corporation shall be:

House of Emmanuel Inc.

FILED

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

11703 Grove Arcade Drive Riverveiw, Florida 33569-5593 2001 AUG 22 P 3: 39

SECRETARY OF STATE TALLAHASSEE, FLORIDA

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To provide aid to Veterans and their families in times of need,

To provide low cost housing,

To provide aid to other fund to other charitable organizations.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:

By a 2/3 majority every five years.

ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS

List name(s), address(es) and specific title(s):

Director/ CEO:Thomas L. Phillips President: Temujin L. Phillips

11703 Grove Arcade Drive Riverveiw, Florida 33569-5593 11703 Grove Arcade Drive

Riverveiw, Florida 33569-5593

Vice President: Herman L.Brown

1409 Alpine Drive Clearwater, Florida

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Thomas L. Phillips 11703 Grove Arcade Drive Riverveiw, Florida 33569-5593

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Thomas L. Phillips 11703 Grove Arcade Drive Riverveiw, Florida 33569-5593

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity.

Signature/Registered Agent

Signature/Incorporator