

F11000003139

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

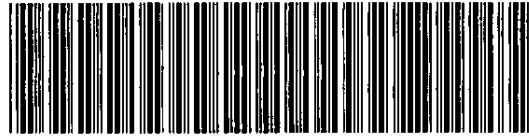
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Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Clibert Merat **NAME**  
**AUTHORIZATION BY PHONE TO**  
**CORRECT** #5+9  
**DATE** 8/3/11  
**DOC. ID#** MRS

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## COVER LETTER

**TO:** New Filing Section  
Division of Corporations

**SUBJECT:** M.C.LIBRARY EDUCATION CENTER CORP.  
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", or "Certificate of Good Standing" 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:

CLEBERT MERAT

Name of Person

M.C. LIBRARY EDUCATION CENTER CORP.

Firm/Company

MCLECC

1879 RICARDO AVE

Address

FORT MYERS FLORIDA 33901

City/State and Zip Code

mclecc1@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

CLEBERT MERAT

Name of Person

at ( 670 ) 508 1068

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    ☐ \$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. M.C. LIBRARY EDUCATION CENTER CORP.  
(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. GEORGIA 3. 87-0773156  
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 6/22/2006 5. Perpetual  
(Date of Incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. 08/01/2011  
(Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S. to determine penalty liability.)
7. 1879 RICARDO AVE FORT MYERS FLORIDA 33901  
(Principal office address)
- P.O.BOX 322 DOUGLASVILLE GEORGIA 30133  
(Current mailing address)
8. FOOD BANK, CLOTHNG BANK, HEALTHCARE, EDUCATION, SOCAILSERVICE, HOUSING  
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)
9. Name and street address of Florida registered agent: (P.O. Box **NOT** acceptable)

Name: Clebert Merat

Office Address: 1879 RICARDO AVE

FORT MYERS

(City)

Florida

33901

(Zip Code)

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**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.*

  
(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**

Chairman: CLEBERT MERAT

Address: P.O.BOX 322 DOUGLASVILLE GEORGIA 30133

678 508 1068 ext 221 mclecc1@gmail.com

Vice Chairman: GERALD SC. MARC

Address: P.O.BOX 322 DOUGLASVILLE GEORGIA 30133

678 508 1068 ext 210 mclecc1@gmail.com

Director: SHESNEL MELIDOR

Address: P.O.BOX 322 DOUGLASVILLE GEORGIA 30133

678 508 1068 ext 206 mclecc1@gmail.com

Director: RONALD LAFRNCE

Address: P.O.BOX 322 DOUGLASVILLE GEORGIA 30133

678 508 1068 ext 209 mclecc1@gmail.com

**B. OFFICERS**

President: CLEBERT MERAT

Address: P.O.BOX 322 DOUGLASVILLE GEORGIA 30133

678 508 1068 ext 221 mclecc1@gmail.com

Vice President: GERALD SC. MARC

Address: P.O.BOX 322 DOUGLASVILLE GEORGIA 30133

678 508 1068 ext 210 mclecc1@gmail.com

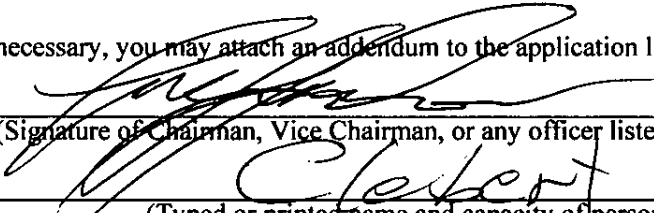
Secretary: HOLLY DALTON

Address: P.O.BOX 322 DOUGLASVILLE GEORGIA 30133

Treasurer: JACQUELINE C. MERAT

Address: P.O.BOX 322 DOUGLASVILLE GEORGIA 30133

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

13.   
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Clebert Merat  
(Typed or printed name and capacity of person signing application)

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TALLAHASSEE FLORIDA

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# STATE OF GEORGIA

## Secretary of State

Corporations Division  
315 West Tower  
#2 Martin Luther King, Jr. Dr.  
Atlanta, Georgia 30334-1530

### CERTIFICATE OF EXISTENCE

I, Brian P. Kemp, Secretary of State and the Corporations Commissioner of the state of Georgia, hereby certify under the seal of my office that

#### M.C. LIBRARY EDUCATION CENTER CORP.

##### Domestic Non-Profit Corporation

was formed or was authorized to transact business on 06/22/2006 in Georgia. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.



WITNESS my hand and official seal of the City of Atlanta and the State of Georgia on 3rd day of August, 2011

*B. P. Kemp*

Brian P. Kemp  
Secretary of State

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