

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (850)222-1092 Fax Number : (850)878-5368

\*\*Enter the email address for this business entity to be used for futureannual report mailings. Enter only one email address please; \*\*\*

## FOREIGN PROFIT/NONPROFIT CORPORATION Imani Milele Children Inc.

Certificate of Status	0
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6/15/2012

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#### COVER LETTER

TO: New Filing Section Division of Corporations				ī	•
SUBJECT: IMANI MILELE CHILDREN INC					:
Name of corporation - must	include suffix		· · · · · · · · · · · · · · · · · · ·		İ
Dear Sir or Madam:		. "		٠	. !
The enclosed "Application by Foreign Not for Profit Corp "Certificate of Existence", or "Certificate of Good Standing not for profit corporation to conduct its affairs in Florida.	oration for Auti g" and check are	horization to Co submitted to re	onduct its a egister the	Affairs is above re	n Flork eferenc
Please return all correspondence concerning this matter to the f	following:				1
KAROLI SSEMOGERERE			•		į
Name of Person		<u></u>			j
IMANI MILELE CHILDREN INC			•		\ \ !
Firm/Company 14 WALL STREET 20TH FLOOR				,	İ
Address	•	<del></del>			٠.
NEW YORK, NEW YORK 10005		,			
City/State and Zip c	ode.	<del></del>			10
KSSEMOGE@GMAIL.COM					
E-mail address: (to be used for future	e annual report no	otification)			· :
For further information concerning this matter, please call:					
CAROLI SSEMOGERERE at (212 ) 618-1	13 <b>22</b>				:
	Daytimė Telepho	ne Number	-	٠.	
•		•	•		
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle	MAILING AD New Filing Sec Division of Cor P.O. Box 6327 Tailahassee, FL	tion porations			
Tallahassee, FL 32301			•		<u> </u>
Inclosed is a check for the following amount:					1
		marker co Ditta	, as President		
\$70.00 Filing Fee \$\sum_{Certificate of Status}\$ \$78.75 Certificate of Status	Filing Fee & ed Copy	Certificate a Certificate a	Status &	•	

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## 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:

	OREGON	-, 4		45-4220798			
(State or cor	untry under the law of which it is	incorporated)	(F	El number, if applica	ole)		
	12/30/2011	5.	•	PERPETUAL			
7	Date of Incorporation)	(Di	ration: Yea	corp. will cease to e	kist or "per	powal")	_
	•	NOT APPLICAT	BLE				
late first cond	ducted affairs in Florida if prior to re	egistration. See section	u 617.1501	& 617.1502, F.S. to de	termine per	alty liab	rili
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	, ,	(Principal office a	ddress)		<del></del>	·····	_
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ame and <u>str</u>	eet address of Florida registere	d agent: (P.O. Box	NOT acce	ptable)	#6 - E	۷ì	!
						770	Ţ
· Name:	MICHALE EDWARD LYLE				5		`
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4 11	10203 OS 1	<del></del>	,			9	
e Address:							
e Address:	SEBASTIAN	101.	orida	32958			

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.

#LB37 - 09/03/2006 C T System Ceilne

t2. Nar	nes and business addresses of officers and/or directors;	FILED
	ECTORS	12 JUN 15 M 11: 20
	SSEMANDA MBUGA MOSES	SECRETADA DE 11: 20
	1911 MOUNTAINVIEW LANE SUITE 500	TALLAISSE PLANE
	Forest grove or 97116	*
Vice Cha	iman: DITHAN KADDU	•
	1911 MOUNTAINVIEW LANE SUITE 500	
	FOREST GROVE 97116	
Director:	MICHAEL EDWARD LYLE	Hopkins Joyce Ssemanda
Address:	10205 US 1	1911 MOUNTAINVIEW LAND SUITE 500
	SEBASTIAN FL 32958	FOREST GRÖVE IL 97116
Director:	BARBARA M CIBBY	
	1911 MOUNTAINVIEW LANE SUITE 500	
	FOREST GROVE OR 97116	
B. OFF)	CERS	
President:	ssemanda mbuga moses	
	1911 MOUNTAINVIEW LANS SUITE 500	
	FOREST GROVE OR 97116	
Vice Presi	dent: DITHAN KADDU	
	1911 MOUNTAINVIEW LAND SUITE 500	
	FOREST GROVE OR 97116	
Secretary:		
Address:		IMANI MILELE CHILDREN INC.
Treasurer:		TMAN SUITE 500 - POREST GROVE.
Address:		5//7/7017
	Finecessary, you may attach an addendum to the application of the application of the application of the application of the application of the application of the application of the application of the application of the application of the application of the application of the application of the application of the application of the application of the application of the application of the application of the application of the application of the application of the application of the application of the application of the application of the application of the application of the application of the application of the application of the application of the application of the application of the application of the application of the application of the application of the application of the application of the application of the application of the application of the application of the application of the application of the application of the application of the application of the application of the application of the application of the application of the application of the application of the application of the application of the application of the application of the application of the application of the application of the application of the application of the application of the application of the application of the application of the application of the application of the application of the application of the application of the application of the application of the application of the application of the application of the application of the application of the application of the application of the application of the application of the application of the application of the application of the application of the application of the application of the application of the application of the application of the application of the application of the application of the application of the application of the application of the application of the application of the application of the application of the application of the application of the appl	UA) Claimed in in the annual distribution in the commentation in
(Signal	ture of Chairman, Vice Chairman, or any officer lis	ted in number 12 of the application)
4. SSEW	ianda mbuga moses, chairman and president	OF THE CORFORATION
	(Typed or printed name and capacity of a	person signing application)

r'Lois - Qimpatil C 7 System Celles

FILED

**CERTIFICATE** 

12 JUN 15 AH 11: 20

# State of Oregon MASSEE, FLORIDA

## OFFICE OF THE SECRETARY OF STATE Corporation Division

I, KATE BROWN, Secretary of State of Oregon, and Custodian of the Seal of said State, do hereby certify:

### IMANI MILELE CHILDREN INC

was

incorporated

under the Oregon

Nonprofit Corporation Act

on

December 30, 2011

and is active on the records of the Corporation Division as of the date of this certificate.



In Testimony Whereof, I have hereunto set my hand and affixed hereto the Seal of the State of Oregon

KATE BROWN, Secretary of State

May 31, 2012

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