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TALLAHASSEE, FLORIDA

11/13/14

## COVER LETTER

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

**SUBJECT:** Selamta Family Project, Inc.  
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 Status" 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:

Marisa Stam

Name of Person

Selamta Family Project, Inc.

Firm/Company

PO Box 1857

Address

Lake Placid, FL 33862

City/State and Zip Code

marisa@selamtafamilyproject.org

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

For further information concerning this matter, please call:

Marisa Stam

Name of Person

at ( 863 ) 840-1719

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. **Selamta Family Project, Inc.**

(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.)

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. **Vermont**

(State or country under the law of which it is incorporated)

3. \_\_\_\_\_

(FEI number, if applicable)

4. **January, 14, 2005**

(Date of Incorporation)

5. **perpetual**

(Duration: Year corp. will cease to exist or "perpetual")

6. \_\_\_\_\_  
(Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S., to determine penalty liability.)

7. **238 Orchard Lane Windsor, VT 05089**

(Principal office address)

**PO Box 1857 Lake Placid, FL 33862**

(Current mailing address)

8. **Provide forever families for orphaned children in Ethiopia**

(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: **Marisa Stam**

Office Address: **323 Buccaneer St NW**

**Lake Placid**

(City)

Florida **33852**

(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.*



(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.

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12. Names and addresses of officers and/or directors

**A. DIRECTORS**

Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: **Marisa Stam**

Address: **323 Buccaneer St NW**

**Lake Placid, FL 33862**

Director: \_\_\_\_\_

Address: \_\_\_\_\_

**B. OFFICERS**

President: **James Wasz**

Address: **7 Griffin Street**

**Simsbury, CT 06070**

Vice President: **Debra Mitchell**

Address: **17 Rope Ferry Road**

**Hanover, NH 03755**

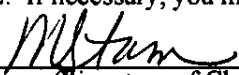
Secretary: **Sandra Soho**

Address: **238 Orchard Lane Windsor, VT 05089**

Treasurer: **Aidan Barry**

Address: **8 Hersey Lane Stratham, NH 03885**

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. **Marisa Stam - US Director**  
(Typed or printed name and capacity of person signing application)

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SEC. OF STATE  
TALLAHASSEE, FLORIDA

STATE OF VERMONT  
OFFICE OF SECRETARY OF STATE

Certificate of Good Standing

I, James C. Condos, Vermont Secretary of State, do hereby certify that according to the records of this office

SELAMTA FAMILY PROJECT, INC.

a Domestic Non-profit Corporation formed under the laws of the State of VERMONT, was filed for record in this office on Jan 14, 2005.

I further certify that the company has perpetual duration, that its most recent annual report is on file, and that as of this date, articles of dissolution / withdrawal have not been filed.

November 06, 2014

Given under my hand and the seal of the State of Vermont, at Montpelier, the State Capital.



*James C. Condos*

James C. Condos  
Vermont Secretary of State

Business ID: 0076135  
Certificate Number: 2013101873001

STATE OF VERMONT  
OFFICE OF SECRETARY OF STATE

**Certificate of Amendment**

I, James C. Condos, Vermont Secretary of State, do hereby certify that

attached is a true copy of the

ARTICLES OF AMENDMENT

For  
**SELAMTA FAMILY PROJECT, INC.**

Formerly Known as

**HUMAN CAPITAL FOUNDATION, INC.**

As filed in this department effective September 11, 2014



September 11, 2014

Given under my hand and the seal  
of the State of Vermont, at  
Montpelier, the State Capital

*James C. Condos*

James C. Condos  
Secretary of State



**VERMONT SECRETARY OF STATE**  
**Corporations Division**

MAILING ADDRESS: Vermont Secretary of State, 128 State Street, Montpelier, VT 05633-1104  
DELIVERY ADDRESS: Vermont Secretary of State, 128 State Street, Montpelier, VT 05633-1104  
PHONE: 802-828-2386 WEBSITE: [www.sec.state.vt.us](http://www.sec.state.vt.us)

**BUSINESS AMENDMENT**

**\*\*ELECTRONICALLY FILED\*\***

FILING NUMBER: 0001986906

FILING DATE/TIME: 9/11/2014 10:21:00 AM

BUSINESS INFORMATION	
BUSINESS ID	0076135
BUSINESS TYPE	Domestic Non-profit Corporation
BUSINESS DESCRIPTION	Any Legal Purpose
BUSINESS EMAIL	jwasz1979@gmail.com

The following items were amended :

BUSINESS INFORMATION	
BUSINESS NAME	SELAMTA FAMILY PROJECT, INC.

PRINCIPAL BUSINESS OFFICE ADDRESS			
STREET ADDRESS	238 Orchard Lane	CITY	Windsor
STATE	Vermont	ZIP CODE	05089
COUNTRY	United States		

MAILING ADDRESS			
STREET ADDRESS	238 Orchard Lane	CITY	Windsor
STATE	Vermont	ZIP CODE	05089
COUNTRY	United States		

OFFICER/DIRECTOR INFORMATION	
OFFICER/DIRECTOR NAME	OFFICER/DIRECTOR ADDRESS
Aidan Barry	8 Hersey Lane, Strathan, NH, 03885, USA
Ann Johnston	P.O. Box 291, S. Woodstock, VT, 05071, USA
Carolynne Krusi	3 Diana Court, Hanover, NH, 03755, USA
Christie Morse	2 Mulherrin Farm, Hanover, NH, 03755, USA
Debra Mitchell	17 Rope Ferry Road, Hanover, NH, 03755, USA
Erinn Steele	68 Norwood Farms Road, York, ME, 03909, USA
James Wasz	7 Griffin Street, Simsbury, CT, 06070, USA
Letha Mills	286 Maple Hill Road, Norwich, VT, 05055, USA
Sandra Soho	238 Orchard Lane, Windsor, VT, 05089, USA

Amendment Text	
Amendment Text	The Articles of Incorporation are amended to delete Article V and all references to "Chairman" of the Corporation. Article VI of the Articles of Incorporation is amended to delete the reference to "designated" Directors.