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T WASHINGTON

DEC 12 2016

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Harambee Community 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", 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:

Larry M. Walker, Jr.

Name of Person

4-Serenity, Inc.

Firm/Company

PO Box 390428

Address

Snellville, GA 30039

City/State and Zip Code

lwalker@4-serenity.com

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

For further information concerning this matter, please call:

Dr. Lisa M. Wilson-Tait

Name of Person

at (770)

Area Code

356-0101

Daytime Telephone Number

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration 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. Harambee Community 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.)

Harambee CDC of Georgia Incorporated

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

2. Georgia

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

3. 25-1792206

(FEI number, if applicable)

4. 01/11/2007

(Date of Incorporation)

5. N/A

(Date of duration, if other than perpetual)

6. N/A

(Date first conducted affairs in Florida if prior to registration. See sections 617.1301 & 617.1302, F.S. to determine penalty liability.)

7. 5238 Ashley Drive, SW Lilburn, GA 30047

(Principal office address)

(Current mailing address, if different)

8. Organized exclusively for charitable, educational and scientific purposes under IRC Section 501(c)(3).

(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: Henry Fuller, Jr.

Office Address: 318 Lakeview Drive, Suite 203

Weston

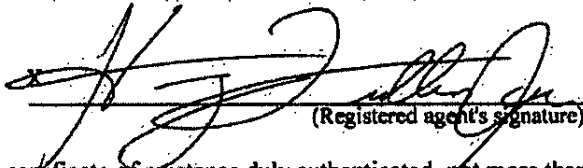
(City)

Florida 33326

(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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16 DEC -9 AM 10:57
TALLAHASSEE, FLORIDA

12. NAMES AND ADDRESSES OF OFFICERS AND/OR DIRECTORS

A. DIRECTORS

Chairman: Lisa Wilson-Tait
Address: 5238 Ashley Drive, SW
Lilburn, GA 30047

Vice Chairman: Roxanne Aguilard
Address: 504 Bruin Court
Stockbridge, GA 30281

Director: Klara Adams
Address: 1 Dancer Ct
Owings Mills, MD 21117

Director: Sharon Walters
Address: 4338 Pinefiled Court
Randallstown, MD 21133

B. OFFICERS

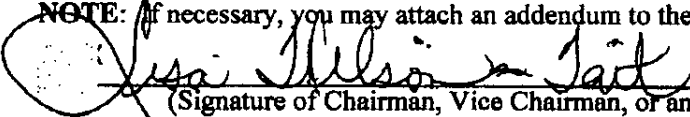
President: Henry Fuller, Jr.
Address: 318 Lakeview Drive, Suite 203
Weston, FL 33326

Vice President: Lisa Wilson-Tait
Address: 5238 Ashley Drive, SW
Lilburn, GA 30047

Secretary: Nathan Cohen
Address: 5238 Ashley Drive, SW, Lilburn, GA 30047

Treasurer: Larry Walker, Jr.
Address: 2775 Trotters Walk Trl, Snellville, GA 30078

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


(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)
14. Lisa Wilson-Tait

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

STATE OF GEORGIA

Secretary of State

Corporations Division

313 West Tower

2 Martin Luther King, Jr. Dr.

Atlanta, Georgia 30334-1530

CERTIFICATE OF EXISTENCE

I, Brian P. Kemp, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

HARAMBEE COMMUNITY DEVELOPMENT CORPORATION

a Domestic Nonprofit Corporation

was formed in the jurisdiction stated below or was authorized to transact business in Georgia on the below date. 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.

Docket Number : 13581635
Date Inc/Auth/Filed : 01/11/2007
Jurisdiction : Georgia
Print Date : 11/23/2016
Form Number : 211



B. P. Kemp

Brian P. Kemp
Secretary of State