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Florida Department of State  
Division of Corporations  
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Katherine Harris, Secretary of State

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## To:

Division of Corporations  
Fax Number : (850) 205-0381

## From:

Account Name : EMPIRE CORPORATE KIT COMPANY  
Account Number : 072450003255  
Phone : (305) 634-3694  
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## FLORIDA NON-PROFIT CORPORATION

~~SAINT-LOUIS DU NORD-HAITI, INC.~~

SLN - Haiti, INC.

Certificate of Status	0
Certified Copy	0
Page Count	02 (4)
Estimated Charge	\$70.00

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TALLAHASSEE, FLORIDA

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B. McKnight JAN 14 2002



FLORIDA DEPARTMENT OF STATE

Katherine Harris  
Secretary of State

January 11, 2002

EMPIRE

SUBJECT: SLN - HAITI, INC.  
REF: W02000000929

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Division of Corporations - P.O. BOX 6327 Tallahassee, Florida 32314

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TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

SLN- Haiti, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of the business and mailing address of this corporation shall be: 625 NE 124 Street, Suite B, Miami, Florida 33161

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:  
For the development of the city of Saint-Louis du Nord

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:  
Elections for Directors will be held every Two (2) Years or as stated in the by laws.

ARTICLE V INITIAL DIRETORS/OFFICERS

The name(s), address(es) and title(s):

Anroine Isma, President	625 NE 124 Street, Miami, FL 33161
Jude Alcindor, Vice President	19600 N.E Miami CT, Miami, FL 33179
Jean Monestime, Vice President	13018 N.E 8 <sup>th</sup> Ave, Miami, FL 33161
Mac-Kinley Lauriston, Treasurer	6710 S.W 8 <sup>th</sup> Street, Pembroke Pines, FL 33023
Nuella Joseph, Secretary	494 Hardwood Place, Boca Raton, FL 33431

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the registered agent is:

Antoine Isma 625 NE 124 Street, Miami, FL 3361

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Jude Alcindor 19600 N.E. Miami CT, Miami, FL 33179

Jude Alcindor  
Signature/Incorporator

11/11/02  
Date

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TOTAL P.04

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CERTIFICATE OF DESIGNATION  
REGISTERED AGENT/REGISTERED OFFICE

SLN-Haiti, INC.  
(Name of Corporation)

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.

  
REGISTERED AGENT

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