

NO3000007840

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

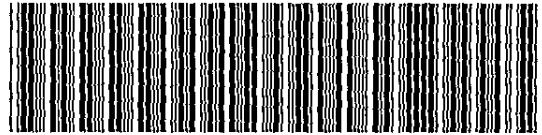
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400022631564

09/08/03--01008--004 **87.75

FILED
CLERK OF STATE
DIVISION OF CORPORATIONS
03 SEP -5 PM 12:05

9-11

TRANSMITTAL LETTER

Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

SUBJECT: HAITIAN - AMERICAN COALITION, INC.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

☐ \$70.00
Filing Fee

☐ \$78.75
Filing Fee &
Certificate of
Status

☐ \$78.75
Filing Fee
& Certified Copy

☒ \$87.50
Filing Fee,
Certified Copy
& Certificate

ADDITIONAL COPY REQUIRED

FROM: MARIE ELSIE INNOCENT
Name (Printed or typed)

519 GREENBRIAR BLVD.
Address

ALTAMONTE SPRINGS, FL.
City, State & Zip

(407) 389-1484
Daytime Telephone number

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION

In Compliance with Chapter 617, F.S., (Not for Profit)

ARTICLE I NAME

The name of the corporation shall be:

HAITIAN-AMERICAN CORPORATION, INC.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
03 SEP -5 PM 12:05

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

3113 NORTH POWERS DRIVE,
ORLANDO, FLORIDA, 32818-3182

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

- A) EDUCATE AND REHABILITATE TROUBLED YOUNGSTERS;
- B) PROMOTE BILINGUAL LITERACY AMONG THE HAITIAN COMMUNITY IN THE STATE OF FLORIDA;
- C) ESTABLISH A SHELTER IN CENTRAL FLORIDA FOR NEGLECTED YOUNG PEOPLE;
- D) ACQUIRE REAL OR PERSONAL PROPERTY IN CONNECTION WITH THE AFF; (OF THIS ENTITY)

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:

IN A MANNER AND TIME AS DESCRIBED IN THE BY-LAWS

ARTICLE V INITIAL DIRECTORS/OFFICERS

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

A) MARIE ELSIE INNOCENT 519 GREENBRIAR BLVD.,
PRESIDENT ALTAMONTE SPRINGS, FL, 32714-

B) JOSUE INNOCENT 519 GREENBRIAR BLVD.,
VICE-PRESIDENT AND (TREASURER) ALTAMONTE SPRINGS, FL, 32714

C) WILL INNOCENT, MD. 3113 N. POWERS DR
SECRETARY-GENERAL ORLANDO, FL, 32818

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

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

MARIE ELSIE INNOCENT,
519 GREENBRIAR BLVD.,
ALTAMONTE SPRINGS, FL,
32714-2818

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

MARIE ELSIE INNOCENT,
519 GREENBRIAR BLVD.,
ALTAMONTE SPRINGS, FL, 32714-2818

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.

Marie Elsie Innocent
Signature/Registered Agent

9/03/03
Date

Marie Elsie Innocent
Signature/Incorporator

9/03/03
Date