NO 700005009

(Requestor's Name)		
(Address)		
(* (44,055)		
(Address)		
(0): (0): (7): (7)	•	
(City/State/Zip/Phone #)		
PICK-UP WAIT	MAIL	
(Business Entity Name)		
(Document Number)	,	
,		
Certified Copies Certificates of Stat	us	
Special Instructions to Filing Officer:		
Special Instructions to Filing Officer:		
\bigwedge^{\prime}		
	,	
Office Use Only		
*		



100097931171

04/25/07--01030--010 **78.75

2007 MAY 18 PM 3: 33
SECRETARY OF STATE
TAIL AND SECRETARY OF STATE

COVER LETTER

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

SUBJECT: ASSOCIATION DE MAMANS CONSOLAISES DE JACKSONVILLE, INC. (PROPOSED CORPORATE NAMÉ - MUST INCLUDE SUFFIX)

\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate PPY REQUIRED		
FROM: ANNY M. KUBI Name (Printed or typed)					
3830 UNIVERSITY BLUS #28 Address					
JACKSONVILLE, FL 32216 City, State & Zip					
(901) 707 - 6873 Daytime Telephone number					

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

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



FLORIDA DEPARTMENT OF STATE Division of Corporations

April 25, 2007

ANNY M KUBI 3830 UNIVERSITY BLVD S #28 JACKSONVILLE, FL 32216

SUBJECT: ASSOCIATION DE MAMANS CONGOL AISES DE JAX (AMCJ

Ref. Number: W07000020081

We have received your document for ASSOCIATION DE MAMANS CONGOL AISES DE JAX (AMCJ and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of the corporation must contain a corporate suffix. This suffix may be: GORPORATION, CORP., INCORPORATED, or INC. Sections 617.0401(1)(a) and 617.1506(1), Florida Statutes, prohibits the use of the word COMPANY CO. in the name of a non-profit corporation.

Entities may file using only the entity's name. Please delete any reference to the "doing business as name" in your document. If you wish to register your fictitious name, you may do so by filing the enclosed application and submitting the appropriate fees to this office.

Section 617.0202(d), Florida Statutes, requires the manner in which directors are elected or appointed be contained in the articles of incorporation or a statement that the method of election of directors is as stated in the bylaws.

Subsequent directors may be elected or appointed by directors, but the initial board must be appointed or elected by the founders, incorporators etc.

A corporation may not act as its own incorporator. Please designate an individual, another active domestic or foreign corporation, with a street address.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6928.

Tim Burch Document Specialist New Filing Section

Letter Number: 307A00028197

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

NAME

ARTICLE I

The name of the corporation shall be:				
ASSOCIATION DESMAMAN	us congolaises de Ja	CKSONVILLE, INC		
ARTICLE II PRINCIPAL OFFICE The principal place of business and mailing as 7352 SANDHUR67				
TACKSONVILLE, FL 32 ARTICLE III PURPOSE The purpose for which the corporation is orgative strengther in the strengther in the and tradition to the assistance to confolese ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected Directors are elected	nized is: Congolese Celture u promotion and tea youth of our Commu families in the USA	within the Community oching of Congo less culture inity. To provide and abroad when necessary.		
ARTICLE V INITIAL DIRECTORS A List name(s), address(es) and specific title(s): * VICTORINE MALA 7352 GANDHURDT RBS JACKSONVILLE, FL 32277 - PRESIDENT		# MONIA TEMO 10100 BAYMEA DOWS RO#1309 JACKGONVILLE, FL 322 56 SECRETARYAND TREASURE		
ARTICLE VI INITIAL REGISTERED The name and Florida street address (P.O. ANNY KUBI 3880 UNIVERSITY BY JACKBONVILLE, FL 32 ARTICLE VII INCORPORATOR The name and address of the Incorporator is VICTORINE MALA 7352 SAWIHURST RUS JACKBONVILLE, FL 3223	N S#28 216 :			
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.				
Signature/Registered Agent		5/14/2007		
ilictoria MALA Signature/Incorporator	7. <u>05</u>	5/14/2007 e		