

NO7000006296

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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(Business Entity Name)

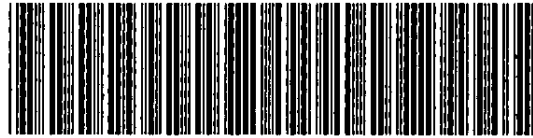
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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COVER LETTER

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

SUBJECT: SUDAN'S Padang Community Association in JAX, FL, 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: Simon Yiep Mayiik
Name (Printed or typed)

230 Mojave Ct # 11
Address

JACKSONVILLE, FL 32216
City, State & Zip

(904) 307-4178
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:

SUDAN'S Padang Community Association, Inc. - Jacksonville, FL

ARTICLE II PRINCIPAL OFFICE

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

*830 Mojave CT # 11
JAX, FL 32216*

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

*To help the Community's schools, health centers, as well as to provide drinking water back home.
To help and orient the Community's newly arriving families and members to the city of Jacksonville.*

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:

Direct elections in a general meeting.

ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS

List name(s), address(es) and specific title(s):

- 1- Peter Makuei Kuol, Chair at 7200 Powers Ave, #90, JAX, FL 32217*
- 2- Simon Yiep Mayiik, Sec-General at 830 Mojave CT # 11, JAX, FL 32216*
- 3- Andrew Bith Abui, Treasurer, at 7061 Old Kings Rd #85, JAX, FL 32217*

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

*Simon Yiep Mayiik
830 Mojave CT # 11, JAX, FL 32216*

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

*Simon Yiep Mayiik
830 Mojave CT # 11, JAX, FL 32216*

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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]

Signature/Registered Agent

06/20/07

Date

[Signature]

Signature/Incorporator

06/20/07

Date