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(Re	questor's Name)				
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PICK-UP	WAIT	MAIL			
(Bu	siness Entity Name	e)			
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Certified Copies Certificates of Status					
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Special Instructions to I	Filing Officer:				





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J. Shivers FEB 12 2009

## **COVER LETTER**

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

SUBJECT: TOUSSAINT LOUVERTURE AND J.J DESSALINES Found ation,
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

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\$70.00 Filing Fee

\$78.75 Filing Fee &

Certificate of Status

\$78.75

\$87.50

Filing Fee & Certified Copy

Filing Fee,

Certified Copy

& Certificate

ADDITIONAL COPY REQUIRED

FROM: Jules Calixte
Name (Printed or typed)

P.O. Box 381514

Miami, FL 33138

r 35/ 701

Daytime Telephone number

ZOUS FEB II PH 12: 19
SECRETARY OF STATE

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

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

NAME

The name of the corporation shall be: TOUSSAINT LOUVERTURE &JJ DESSALINES FOUNDATION, INC.
ARTICLE II PRINCIPAL OFFICE  The principal street address and mailing address, if different is:  HOME ADRESS: 294 NE 82 TERR MIAMI, FL 33138
MAILING ADRESS: P. O. BOX 381514 MIAMI, FL 33/38  The number for which the comporation is organized is:
To seekto Stablished a Scholarship Fund for Haitian and Haitian-AMERican Descent, Fund raising ARTICLE IV MANNER OF ELECTION Create a Poverty Fund for Directors Shall be elected as Stated
In the bylaws.  ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS List name(s), address(es) and specific title(s):
(P) Jules Calixte 294 NE 82 TERR Miami, FL 33138 (S) Juliette Valcin 15400 NE 6AVE Miami, FL 33161 (T) JEAN Oblin 1600 NW 35th Street Miami 33150
ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS  The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:  Jules Calixfu  294 NE 82 TERR MIAMI, FL 33138
ARTICLE VII INCORPORATOR  The name and address of the Incorporator is:  Jules Calixte  294 NE 82 nd TERR MIAMI, FL 33138
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