

N1000000 4132

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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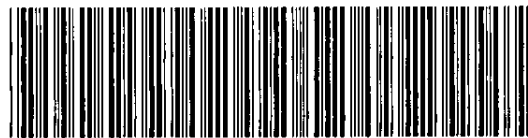
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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10 JUN 25 PM 4:56

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Bom 6/25/10

COVER LETTER

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

SUBJECT: ASSOCIATION NATIONALE DES FINANCES PUBLIQUES
(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: _____
Name (Printed or typed)

115 HERLONG DRIVE # 06
Address

TALLAHASSEE FL 32310
City, State & Zip

(850) 459-3350
Daytime Telephone number

ZBARKA@FSU.EDU
E-mail address: (to be used for future annual report notification)

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: **ASSOCIATION NATIONALE DES FINANCES
PUBLIQUES INC.**

ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is:

155 HERLONG DRIVE #6. TALLAHASSEE FL 32310.

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

- NON PROFIT ORGANIZATION.
- ACADEMIC PURPOSES

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:

**As stated in the
Bylaws -**

- ELECTION
- NOMINATION -

ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS

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

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TALLAHASSEE, FLORIDA

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

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

BARKA MOHAMMED ZINE,
328 PENNELL CIRCLE. # 01- TALLAHASSEE
FL 32310

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

155 HERLONG DRIVE. # 6 TALLAHASSEE
BARKA MOHAMMED ZINE FL 32310

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

06-25-2010.
Date

Signature/Incorporator

06-25-2010.
Date