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(Requestor's Name)
(Address)
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(Document Number)
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12/06/11--01039--001 **17.50

FILED

12 JAN 26 PH 12: 39

SECRETARY OF STATE
SECRETARY OF STATE

COVER LETTER

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

SUBJECT: The Selam-Entrean Community Corporation (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
Certificate of
Status

\$78.75
Filing Fee
& Certified Copy
& Certificate

ADDITIONAL COPY REQUIRED

FROM: The Selam-entrean Community Corption

Name (Printed or typed)

P.O. Box GIR

Address

Jacksonville, FL 32234

City, State & Zip

Poy-Sur-5684

Daytime Telephone number

<u>Jossi, yonannes</u> <u>yano, (on</u> E-mail address: (to be used for future annual report notification)

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



RECEIVED M NOV 31 AHII: 02

FLORIDA DEPARTMENT OF STATEMENT OF STATEMENT OF CORPORATIONS

October 18, 2011

THE SELAM-ERITREAN COMMUNITY P.O. BOX 6118 JACKSONVILLE, FL 32236

SUBJECT: THE SELAM-ERITREAN COMMUNITY

Ref. Number: W11000053491

We have received your document for THE SELAM-ERITREAN COMMUNITY and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The articles of incorporation of a nonprofit corporation must be prepared in compliance with section 617.0202, Florida Statutes. Please refer to that section of the law for assistance.

We are enclosing the proper form(s) with instructions for your convenience.

The name must contain a word that will clearly indicate that it is a corporation. This word may be: CORPORATION, CORP., INCORPORATED, or INC. Sections 617.0401(1)(a) and 617.1506(1), Florida Statutes, prohibits the use of the word COMPANY or CO. in the name of a non-profit corporation.

We do not file the By-Laws. You keep them for your records.

Please return 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) 245-6913.

Diane Cushing Regulatory Specialist II Supervisor

Letter Number: 911A00023855



電影學問題如何

12 JAN 26 AM 11: 15

FLORIDA DEPARTMENT OF STATE AHASSEE, FLORIDA Division of Corporations

December 5, 2011

THE SELAM-ERITREAN COMMUNITY P.O. BOX 6118 JACKSONVILLE, FL 32236

SUBJECT: THE SELAM-ERITREAN COMMUNITY

Ref. Number: W11000053491

We have received your document for THE SELAM-ERITREAN COMMUNITY and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Florida law requires the street address of the principal office and, if different the mailing address of the entity. A post office box is not acceptable for the principal office.

I sent an email on December 1st but have not had a response so I am sending this letter. The email you had listed that I used was jossi.yohannes@yahoo.com.

Please return 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) 245-6913.

Diane Cushing
Regulatory Specialist II Supervisor

Letter Number: 111A00027104

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

	PRINCIPAL OFFICE		Mailing addraga if different in
	Principal street address 9838 Milison Forks	Sec. 150	Mailing address, if different is:
	Jackson Ville, FL 33		JACKSON MILE, FL 32236
RTICLE III	PURPOSE		in an analysis Congress
e purpose for whi	ch the corporation is organized is:	selam- Er	ritrean community corpurations of the purposes incl
s organize	a for educational pur	-poses. Sc	ome of the purposes me
Luiture,	reading, writing, and	Sports.	
RTICLE IV	MANNER OF ELECTION The manner in	n which the directors	are elected and appointed: Directors
se enected	by a majority voke o	of the cur	rent directors.
	INITIAL OFFICERS AND/OR DIRECTO		
	: Andom Misaina	Name and Title:	Tewolde Woldeselassie,
Address:	8685 Spring tree Rd	Address:	9033 moorgale Ct.
(cretary)	Jackson VIII Fr 32210	_	104 - 274 - 1022
4 3	404. (143.32.15		
	: Tesfalasse Gebreysus		: yosief yohannes
Address:	7837 Summer Star Ct.	Address:	101 east 8+0 Street
Treasurer)	JOCKSONVIIK, FC 32221 GDU-756-1419		Jacksonville, Fr 32206
	404.110.1414	_	(even
Name and Title	: Tewdos Mehan	Name and Title	:Coord
Address:	9828 Welson Forks Drive	Address:	
(Chair)	Jacksonville, FC 3222		
•	904 - 177 - 2428	-	
	REGISTERED AGENT		12 S.
	da street address (P.O. Box NOT acceptable)		nt is:
Name:	Sara Hailemichael Zen		ARE JAN T
Address:	7437 Summer Star CT Sackbonville, Fe ,32221		
	904-536.0182	-	26 28 1.55E
		-	mg _ <u>m</u>
	INCORPORATOR		三 三 三 三 三 三 三 三 三 三 三 三 三 三 三 三 三 三 三
	ess of the Incorporator is:		£5, ₹5
Name:	Temperos Menari	<u>~</u>	DE 3
Address:	1928 Nelson Forks Dr 10016507VIIIC, FL 32222	<u>√</u> ∨e	9
	904- 777 - 2UAY		
			
laving been named	as registered agent to accept service of proc	ess for the above s	tated corporation at the place designated in this
ertificate, I am fami	liar with and accept the appointment as registe		e to act in this capacity
V ~	Halm'e Cal 3C Required Signature of Registered Agent	Marco all	intratanu
Alma	y university	- may	111 1 001
	Required Signature of Registered Agent		Date
			
Submit this docume		true. I am aware th	at any false information submitted in a document
submit this docume the Department of		true. I am aware th ded for in s.817.155	at any false information submitted in a document i, F.S.
submit this docume the Department of	ent and affirm that the facts stated herein are	true. I am aware th ided for in s.817.155	at any false information submitted in a document f , f . S .