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SECRETARY OF STATE
AHASSEE FLORIN

MRD 12

11/17-19272

COVER LETTER

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

Enclosed is an original and one (1) copy of the Articles of Incorporation and a check for: \$70.00 \$78.75 \$78.75 \$87.50 Filing Fee Filing Fee & Filing Fee Filing Fee, Certified Copy Certificate of & Certified Copy & Certificate Status ADDITIONAL COPY REQUIRED

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



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12 APR 23 AM IO: 45

FLORIDA DEPARTMENT OF STATE FLORIDA Division of Corporations

April 5, 2012

DR. MARLENE FELIX-MARCELIN, PH.D 1941 N.W. 185TH TERRACE MIAMI GARDENS, FL 33058

SUBJECT: COMMUNAUTE CHARITABLE DE MORNE PELE

Ref. Number: W12000019222

We have received your document for COMMUNAUTE CHARITABLE DUMORNE PELE and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

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.

List the corporation name in Article I of your form. You can not file using both our format and your drawn up articles. You must use one or the other. Please call if you have questions in correcting this document for filing.

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.

The document must contain a registered agent with a Florida street address and a <u>signed</u> statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

You must list at least one incorporator with a complete business street address.

Please return the corrected 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) 245-6052.

Ruby Dunlap Regulatory Specialist II New Filing Section

Letter Number: 512A00011137

www.sunbiz.org

Division of Communitions D.O. DOV 0907 Tellaharras Elevida 2001

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

he name of the o	corporation shall be: Commonaute	charitable du A	Horne Pele Corporation
ARTICLE II	PRINCIPAL OFFICE Principal street address 1941 N.W. 135 Terro		Mailing address, if different is:
	Mianie Gardens Fl.	28	
RTICLE III	PURPOSE	- al arita	able bus bores
ne purpose for	which the corporation is organized is:	Y Jin will	10:00
such sovio-	PURPOSE which the corporation is organized is: as community education spire munity he at h, m	education tral/ball	t sible schools,
ARTICLE IV	MANNER OF ELECTION The mann Elections by votes	er in which the directors are e	lected and appointed:
	- <i>1</i>		Direc
Name and 'Address:	INITIAL OFFICERS AND/OR DIRECTION Title: 1. Marlow Felix Marcelly 1941 N.N. 1854 FORKE Wiami Gardens FL 3305 Director	Name and Title: // Address: 630 Ho	llywood FL.
Name and 'Address:	Title: Dr. HARLY-HANS FRANCOIS 7624 FAIRWAY Blud MIRAMAR FL 33023 Director	Vice - Name and Title:Address:	erel Særetæry
Name and 'Address:	Title:	Name and Title:Address:	
ARTICLE VI	REGISTERED AGENT		
	lorida street address (P.O. Box NOT acceptab	le) of the registered agent is:	₹.o →
Name:	1941 N.W. 185 Ferr.) 01 214 125	2
Address:	Miami Gardens FL		AR P
	33058	a.t. a	N game
	Dr. Mariene Felle Mar	<u>ceiin,</u>	SSE W
ARTICLE VII	INCORPORATOR		mg =
	Idress of the Incorporator is:		
Name:	1941 NW. 185 lerr	. <u> </u>	10 8 S
Address:	Idress of the Incorporator is: 1941 NW 185 Terr Mismi GARdow FL	·	記しい
	Dr. Marlene Felix Ma	reelin	P
	med as registered agent to accept service of painting and accept the appointment as re		
	Tene felex Marceline Required Signature of Registered Age		4/02/2012
- /w	Required Signature of Registered Age	ent	Date
	ument and affirm that the facts stated herein o It of State constitutes a third degree felony as p		
w ine vepurimen /	-//	-	A = A
	Farlene Jelix Marlelin Required Signature of Incorpor	<u></u>	4/02/2012
	Required Signature of Incorpor	rator	Date