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15 MAY 29 AM 10:32
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: Haiti Development Network 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: Howard Hohl

Name (Printed or typed)

26W231 Tuckaway Ct.

Address

Winfield, IL 60190

City, State & Zip

630.681.9604

Daytime Telephone number

hhohl@aol.com

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: Haiti Development Network Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address:
Southeast Financial Center, Suite 2790

200 South Biscayne Boulevard

Miami, FL 33131

Mailing address, if different is:
26W231 Tuckaway Ct.

Winfield, IL 60190

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: to promote economic growth in Haiti.

ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected and appointed: Elected

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Howard Hohl - President

Address 26W231 Tuckaway Ct.

Winfield, IL 60190

Name and Title: Jacques Jonassaint - Director

Address: _____

Name and Title: Joseph Davis - Director

Address 11661 West Atlantic Blvd, Suite 1006

Coral Springs, FL 33071

Name and Title: _____

Address: _____

Name and Title: _____

Address _____

Name and Title: _____

Address: _____

15 MAY 29 AM 10:32
TALLMAN & ASSOCIATES
P.A.

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: Joseph Davis

Address: 11661 West Atlantic Blvd, Suite 1006
Coral Springs, FL 33071

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: Howard Hohl

Address: 26W231 Tuckaway Ct.
Winfield, IL 60190

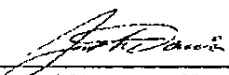
ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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



Required Signature of Registered Agent

5/22/15

Date

I submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.



Required Signature of Incorporator

5/22/15

Date

15 MAY 29 AM 10:33
TALLAHASSEE, FLORIDA
STATE DEPARTMENT OF REVENUE