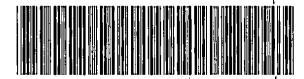
N17000010786

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	_
(Document Number)	
Certified Copies Certificates of Status	_
Special Instructions to Filing Officer:	
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Office Use Only



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T. BURCH 0CT 2 7 2017

COVER LETTER

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

Certificate of Domestication - Selamta Family Project, Inc., a nonprofit corp

SUBJECT:

Enclosed is an original and one (1) copy of the Certificate of Domestication and a check for:

FEES:

Certificate of Domestication	\$50.00		
Articles of Incorporation and Certified Copy	<u>\$78.75</u>		
Total to domesticate and file	\$128.75		

OPTIONAL:

Certificate of Status

\$8.75

Sełamta Family Project, Inc.
Name (printed or typed)
PO Box 1857
Address
Lake Placid, FL 33862
City, State & Zip
863-840-1719
Daytime Telephone Number
marisa@selamtafamilyproject.org
E-mail address: (to be used for future annual report notification)



FLORIDA DEPARTMENT OF STATE Division of Corporations

August 16, 2017

SELAMTA FAMILY PROJECT, INC. PO BOX 1857 LAKE PLACID, FL 33862

SUBJECT: SELAMTA FAMILY PROJECT, INC.

Ref. Number: W17000067273

We have received your document for SELAMTA FAMILY PROJECT, INC. and your check(s) totaling \$137.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

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 purpose contained in your articles of incorporation should be more specific. Please correct your articles to reflect the specific purpose for which the non profit corporation is being organized.

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) 245-6052.

Letter Number: 217A00016774

Tim Burch Regulatory Specialist III

www.sunbiz.org

FILED

\$128.75

NOT FOR PROFIT 17 001 26 MM 9: 41 CERTIFICATE OF DOMESTICATION 7 1273

The undersigned, R. James Wasz	Chairman
(Name)	(Title)
of Selamta Family Project, Inc. (Corporation Name)	a foreign Corporation
in accordance with section 617.1803, Florida Statutes	does hereby certify:
1. The date on which corporation was first formed w	as January 14 , 2005 .
2. The jurisdiction where the above named corporation came into being was State of Vermont	on was first formed, incorporated, or otherwise
3. The name of the corporation immediately prior to was Selamta Family Project, Inc.	the filing of this Certificate of Domestication
4. The name of the corporation, as set forth in its arti	cles of incorporation, to be filed pursuant to
s. 617.01201 and 617.0202 with this certificate is Selamta Family Project, Inc.	
5. The jurisdiction that constituted the seat, siege social administration of the corporation, or any other equipmediately before the filing of the Certificate of State of Vermont	ivalent jurisdiction under applicable law,
 Attached are Florida articles of incorporation to co to s. 617.1803. 	omplete the domestication requirements pursuan
Chairman , of Selamta Family Proj	ect, Inc.
and am authorized to sign this Certificate of Domestic so this the 10th day of August	eation on behalf of the corporation and have done
Anis Ulia (Anthorized S	Signature)
Filing F	ine.
Certificate of Domestication	\$50.00
Articles of Incorporation and C	ertified Copy <u>\$78.75</u>

Total to domesticate and file

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

ARTICLE I NAME		1
The name of the corporation shall be:		
Selamta Family Project, Inc.		
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address shall be: Principal Address	Mailing Address	
172 East Interlake Blvd.	PO Box 1857	
Lake Placid, FL 33852	Lake Placid, FL 33862	
ARTICLE III PURPOSE The purpose for which the corporation is organized: All legal activities allowed by Florida law.		
		<u>-</u>
	,	

The manner in which the directors are elec-	
Directors for the coming year shall be	e elected by a majority of the Board of Directors then
serving at each annual meeting.	
	1
ARTICLE V INITIAL DIRECTOR	RS AND/ OR OFFICERS
The name(s) and address(es) and specific	c title(s):
Title/Name	Title/Name
Chairman/R. James Wasz	Secretary/Ben Beisswenger
7 Griffin Street	107 Lyon Street
Simsbury, CT 06070	San Francisco, CA 94117
Title/Name	Title/Name
Director/Aidon Porny	Director/Carolynne Krusi
Director/Aidan Barry	
8 Hersey Lane	3 Diana Court
Stratham, NH 03885	Hanover, NH 03755
	Tida/None
Title/Name Director/Fana Mersha	Title/Name Director/William J. Neilander
Director/Fana Mersha	Director/William J. Neilander

ARTICLE VI INITIAL REGISTERED AGENT The name and Florida street address (P.O. Box NOT a		
Marisa Stam	techniole) of the registered agent is.	
323 Buccaneer St. NW		!
Lake Placid, FL 33852		
ARTICLE VII INCORPORATOR	2000 - 10	17 001
The <u>name and address</u> of the incorporator is:	\$ to 1	22
William J. Nielander	<u>⊆.</u>	A.H.
172 East Interlake Blvd.		Ö
Lake Placid, FL 33852		
**************************************	ocess for the above stated corporation at the pl	ace designate
Signature/Registered Agent	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	:
m M	8-10-17	
Signature/Ibcorbo lator	Date /	Í

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