

N20000003586

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

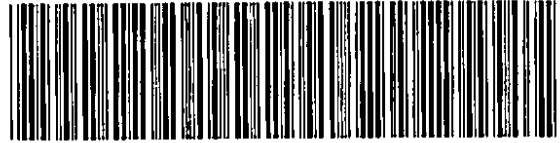
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100339001671

01/13/2016-01/27-027 ***25.00

03/27/2016-01/27-027 ***25.00

2020 MAR 30 PM 4:20
SECRETARY OF STATE
TALLAHASSEE, FL

FILED

N CULP

MAR 24, 2020

COVER LETTER

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

SUBJECT: NATIANAL HAITIAN CONVENTION, INC.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is an original and one (1) copy of the Articles of Incorporation and a check for: *Already paid*

☐ \$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: SERGE JEROME
Name (Printed or typed)

6081 Walnut Hill Dr.
Address

Lake Worth, FL 33467
City, State & Zip

561-329-5888
Daytime Telephone number

Sjerome585@gmail.com
E-mail address: (to be used for future annual report notification)

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



RE

2020 MAR

11:13

FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 9, 2020

SERGE JEROME
6081 WALNUT HILL DR
LAKE WORTH, FL 33467

SUBJECT: NATIONAL HAITIAN CONVENTION, INC.
Ref. Number: W20000013932

We have received your document for NATIONAL HAITIAN CONVENTION, INC. and your check(s) totaling \$105.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

As a condition of a conversion, pursuant to s.605.0212(9) & s.605.0212(10), s.607.1622(9) and/or 607.1622(10), Florida Statutes, the entity must be active and current in filing its annual reports with the Department of State through December 31 of the calendar year in which the conversion is submitted for filing.

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.

Neysa Culligan
Regulatory Specialist II

Letter Number: 720A00003067

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2020 MAR 30 PM 4: 20

SECRETARY OF STATE
TALLAHASSEE, FL

Certificate of Conversion
For
"Other Business Entity"
Into
Florida ~~Profit~~ Corporation
Non Profit

This Certificate of Conversion and attached Articles of Incorporation are submitted to convert the following "Other Business Entity" into a Florida ~~Profit~~ Corporation in accordance with s. ~~607.1115~~ ⁶⁰⁷, Florida Statutes.
Non Profit

1. The name of the "Other Business Entity" immediately prior to the filing of this Certificate of Conversion is:

NATIONAL HAITIAN CONVENTION, LLC

Enter Name of Other Business Entity

2. The "Other Business Entity" is a LLC
(Enter entity type. Example: limited liability company, limited partnership, general partnership, common law or business trust, etc.)

first organized, formed or incorporated under the laws of FLORIDA
(Enter state, or if a non-U.S. entity, the name of the country)

on 11/25/2019
Enter date "Other Business Entity" was first organized, formed or incorporated

3. If the jurisdiction of the "Other Business Entity" was changed, the state or country under the laws of which it is now organized, formed or incorporated:

4. The name of the Florida ~~Profit~~ Corporation as set forth in the attached Articles of Incorporation:
Non Profit

NATIONAL HAITIAN CONVENTION, INC.

Enter Name of Florida ~~Profit~~ Corporation
Non Profit

5. If not effective on the date of filing, enter the effective date: effective on DATE OF FILING
(The effective date: Cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State.)

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.

Signed this 3rd day of March, 20 20

^{Non Profit}
Required Signature for Florida Profit Corporation:

Signature of Chairman, Vice Chairman, Director, Officer, or, if Directors or Officers have not been selected, an Incorporator: _____

Printed Name: SERGE JEROME Title: CHAIRMAN

Required Signature(s) on behalf of Other Business Entity: [See below for required signature(s).]

Signature: _____

Printed Name: SERGE JEROME Title: CHAIRMAN

Signature: _____

Printed Name: _____ Title: _____

Signature: _____

Printed Name: _____ Title: _____

Signature: _____

Printed Name: _____ Title: _____

Signature: _____

Printed Name: _____ Title: _____

Signature: _____

Printed Name: _____ Title: _____

If Florida General Partnership or Limited Liability Partnership:

Signature of one General Partner.

If Florida Limited Partnership or Limited Liability Limited Partnership:

Signatures of ALL General Partners.

If Florida Limited Liability Company:

Signature of a Member or Authorized Representative.

All others:

Signature of an authorized person.

Fees:

Certificate of Conversion:	\$35.00
Fees for Florida Articles of Incorporation:	\$70.00
Certified Copy:	\$8.75 (Optional)
Certificate of Status:	\$8.75 (Optional)

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

FILED

2020 MAR 30 PM 4: 20

SECRETARY OF STATE
TALLAHASSEE, FL

ARTICLE I NAME

The name of the corporation shall be: NATIONAL HAITIAN CONVENTION, INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address:

3200 Roberts Lane
Lake Worth, FL 33461

Mailing address, if different is:

6081 Walnut Hill Dr.
Lake Worth, FL 33467

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To conserve our Haitian identity
through Fellowship, unity, strength and a platform for the
Haitian diaspora
To provide leadership, encouragement, and networking
to our annual convention, and other regional activities

ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected and appointed: The directors
will be elected bi-annually by the convention body.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

<u>CHAIRMAN</u>	
Name and Title: <u>Serge Jerome, PH.D</u>	Name and Title: <u>Othman D. Noel, D.D. Vice-President</u>
Address: <u>6081 Walnut Hill Dr.</u> <u>Lake Worth, FL 33467</u>	Address: <u>30 Countryside Lane</u> <u>Milton, Mass 02186</u>

Name and Title: <u>Diane J Saint-Simon, Esq Ad-</u> <u>ministrator</u>	Name and Title: <u>Marc-Elie Morisset, Treasurer</u>
Address: <u>39 Paerdegat 15th St.</u> <u>Brooklyn, N.Y. 11236</u>	Address: <u>6081 Walnut Hill Dr.</u> <u>Lake Worth FL 33467</u>

Name and Title: <u>Luzana Jerome, Secretary</u>	Name and Title: _____
Address: <u>170 Shoreside Circle</u> <u>Wellington, FL 33414</u>	Address: _____

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: SERGE JEROME

Address: 6081 Walnut Hill Dr
Lake Worth, FL 33467

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Serge Jerome

Address: 6081 Walnut Hill Dr
Lake Worth FL 33467

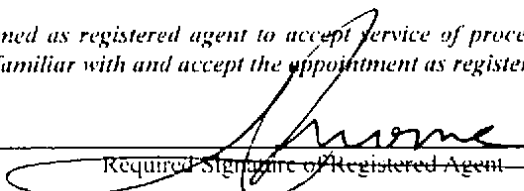
ARTICLE VIII EFFECTIVE DATE:

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 days prior or 90 days after the filing.)

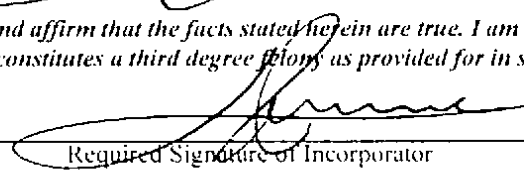
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

03-03-2020
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

03-03-2020
Date

2020 MAR 30 PM 4:20
SECRETARY OF STATE
TALLAHASSEE, FL