

JUL 25 2006 1:55 PM

CAPITAL CONNECTION

NOV 99

F0600000 4920

Florida Department of State
Division of Corporations
Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H06000188452 3)))



H060001884523ABC1

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

FILED
06 JUL 25 PM 1:18
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

To:

Division of Corporations
Fax Number : (850)205-0381

From:

Account Name : YOUR CAPITAL CONNECTION, INC.
Account Number : I20000000257
Phone : (850)224-8870
Fax Number : (850)224-7047

FOREIGN PROFIT/NONPROFIT CORPORATION

D.G.M. ENRICHMENT SERVICES, INC

Certificate of Status	1
Certified Copy	1
Page Count	03
Estimated Charge	\$87.50

Electronic Filing Menu

Corporate Filing Menu

Help

CB 7-26-06

H06000188452

APPLICATION BY FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN FLORIDA

IN COMPLIANCE WITH SECTION 617.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN THE STATE OF FLORIDA:

1. D.G.M ENRICHMENT SERVICES, INC

(Name of corporation: must include the word "INCORPORATED" or "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present. "Company" or "Co." may not be used as a corporate suffix by a nonprofit corporation.)

2. TN 3. 83-0461810
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 6/29/06 5. PERPETUAL
(Date of Incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. _____
(Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S., to determine penalty liability.)

7. 1003 CASSAT AVE JACKSONVILLE, FL 32205
(Principal office address)

1950 SPECTRUM CIR #400-8008 MARIETTA, GA 30067
(Current mailing address)

8. Provide educational assistance and scholarships to youths
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

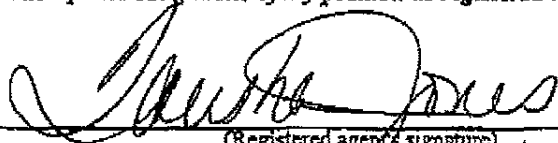
Name: PROMISES TRAVEL & FINANCIAL SERVICES CORP

Office Address: 7226 W COLONIAL DRIVE # 245

ORLANDO, Florida 32818
(City) (Zip Code)

10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.


(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

H06000188452

06 JUL 25 PM 1:18
FILED
DEPT. OF STATE
TALLAHASSEE, FLORIDA

12. Names and addresses of officers and/or directors:

A. DIRECTORS

Chairman: VICTORIA M YOUNG

Address: 1003 CASSAT AVE
JACKSONVILLE, FL 32205

Vice Chairman: DAVID D FERGUSON

Address: 1003 CASSAT AVE
JACKSONVILLE, FL 32205

Director: _____

Address: _____

Director: _____

Address: _____

06 JUL 25 PM 1:18
SECRETARY OF STATE
TALLAHASSEE FLORIDA

FILED

B. OFFICERS

President: _____

Address: _____

Vice President: _____

Address: _____

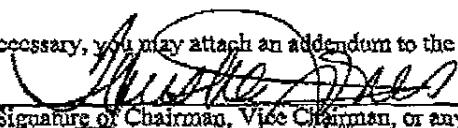
Secretary: TAUSHA JONES

Address: 7226 W COLONIAL DRIVE # 245 ORLANDO, FL 32818

Treasurer: _____

Address: _____

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. 
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. TAUSHA JONES Sec.
(Typed or printed name and capacity of person signing application)

H06000188452

87/25/2006 11:09 9043958044

PAGE 01/01

Secretary of State
Division of Business Services
312 Eighth Avenue North
6th Floor, William R. Snodgrass Tower
Nashville, Tennessee 37243

ISSUANCE DATE: 07/07/2006
REQUEST NUMBER: 05184570A
TELEPHONE CONTACT: (615) 741-6498

CHARTER/QUALIFICATION DATE: 06/29/2008
STATUS: ACTIVE
CORPORATE EXPIRATION DATE: PERPETUAL
CONTROL NUMBER: 0524179
JURISDICTION: TENNESSEE

TO:
D.G.M. ENRICHMENT SERVICES, INC.
9006 OVERLOOK BLVD.
BRENTWOOD, TN 37027

REQUESTED BY:
D.G.M. ENRICHMENT SERVICES, INC.
9006 OVERLOOK BLVD.
BRENTWOOD, TN 37027

CERTIFICATE OF EXISTENCE

I, RILEY C DARNELL, SECRETARY OF STATE OF THE STATE OF TENNESSEE DO HEREBY CERTIFY THAT
"D.G.M. ENRICHMENT SERVICES, INC."

IS A CORPORATION DULY INCORPORATED UNDER THE LAW OF THIS STATE WITH DATE OF
INCORPORATION AND DURATION AS GIVEN ABOVE;
THAT ALL FEES, TAXES, AND PENALTIES OWED TO THIS STATE WHICH AFFECT THE
EXISTENCE OF THE CORPORATION HAVE BEEN PAID;
THAT ARTICLES OF DISSOLUTION HAVE NOT BEEN FILED; AND
THAT ARTICLES OF TERMINATION OF CORPORATE EXISTENCE HAVE NOT BEEN FILED

06 JUL 25 PM 1:18
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FOR: REQUEST FOR CERTIFICATE

ON DATE: 06/30/06

FROM:
VICTORIA M. YOUNG
1004 CALDWELL AVE
NASHVILLE, TN 37204-0000

RECEIVED: ^{FEES} \$120.00 \$0.00
TOTAL PAYMENT RECEIVED: \$120.00

RECEIPT NUMBER: 00003991676
ACCOUNT NUMBER: 00533265



Riley C Darnell

RILEY C. DARNELL
SECRETARY OF STATE