

F22000007374

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

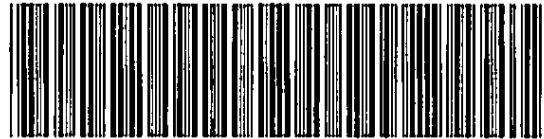
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Rec'd  
12-1-22

Office Use Only



900396643309

10/31/22--00032--005 \*\*\$7.50

CLERK OF SUPERIOR COURT  
STATE OF NEW YORK

2022 DEC -1 PM 4:54

FILED

DEC -6 2022

M. SOLOMON

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: THE HOUSE OF DIVINE HOPE, INC.  
Name of Corporation – must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Not for Profit Corporation for Authorization to Conduct its Affairs in Florida", "Certificate of Existence", or "Certificate of Status" and check are submitted to register the above referenced not for profit corporation to conduct its affairs in Florida.

Please return all correspondence concerning this matter to the following:

Alice Denise Feagins  
Name of Person

THE HOUSE OF DIVINE HOPE, INC.  
Firm/Company

19080 NW 27<sup>th</sup> Ave Unit 201  
Address

Miami Gardens, Florida 33056  
City/State and Zip Code

Trueellleader3@outlook.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Alice D. Feagins at ( 470 ) 808-0052  
Name of Person Area Code Daytime Telephone Number

**Mailing Address:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

☐ \$70.00 Filing Fee

☐ \$78.75 Filing Fee &  
Certificate of Status

☐ \$78.75 Filing Fee &  
Certified Copy

☒ \$87.50 Filing Fee,  
Certificate of Status &  
Certified Copy

2022 DEC -1 PM 4:25

FILED

**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. THE HOUSE OF DIVINE HOPE, 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.)

THE HOUSE OF DIVINE HOPE OF LOVE INCORPORATED  
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Georgia 3. 30-0576951  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 10/17/2009 5. Perpetual  
(Date of Incorporation) (Date of duration, if other than perpetual)

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

7. 19080 NW 27<sup>th</sup> Ave. Unit 201 Miami Gardens FL. 33056  
(Principal office street address)

10104 Country Brook Rd Boca Raton FL. 33428  
(Current mailing address, if different)

8. To help the Youth to become Leaders in their Communities  
(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: Alice Denise Feagins  
Office Address: 19080 NW 27<sup>th</sup> Ave Unit 201  
Miami Gardens, Florida 33056  
(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.*

Alice Denise Feagins  
(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.

2022 DEC -1 PM 4:25  
DEPT OF STATE  
RECEIVED

FILED

12. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

**A. DIRECTORS**

☒ Chairman Name: Alice D Feagins  
☐ Vice Chairman Address: 10104 Country  
☐ Director Brook Rd  
☐ President Boca Raton FL.  
☐ Vice President 33428  
☐ Secretary ☐ Treasurer  
☐ Other: \_\_\_\_\_ ☐ Other: \_\_\_\_\_

☐ Chairman Name: Emanuel Dessin  
☐ Vice Chairman Address: 300 SE 11th Ave  
☐ Director Apt #107  
☐ President Pompano Beach  
☒ Vice President FL. 33060  
☐ Secretary ☐ Treasurer  
☒ Other: \_\_\_\_\_ ☐ Other: \_\_\_\_\_

☐ Chairman Name: Endia Miller  
☐ Vice Chairman Address: 200 South Andrews  
☒ Director Avenue.  
☐ President Fort Lauderdale, FL  
☐ Vice President 33301  
☐ Secretary ☐ Treasurer  
☐ Other: \_\_\_\_\_ ☐ Other: \_\_\_\_\_

☐ Chairman Name: Perry Causey  
☒ Vice Chairman Address: 2830 Adams St Hwd FL  
☐ Director Hollywood Fla 33020  
☐ President \_\_\_\_\_  
☐ Vice President \_\_\_\_\_  
☐ Secretary ☐ Treasurer  
☐ Other: \_\_\_\_\_ ☐ Other: \_\_\_\_\_

☐ Chairman Name: Juanita Causey  
☐ Vice Chairman Address: 2830 Adams St  
☐ Director Hollywood FL 33020  
☐ President \_\_\_\_\_  
☐ Vice President \_\_\_\_\_  
☐ Secretary ☒ Treasurer  
☐ Other: \_\_\_\_\_ ☐ Other: \_\_\_\_\_

☐ Chairman Name: Christian Felix  
☐ Vice Chairman Address: 20940 NE 25th  
☐ Director Court, Miami FL  
☐ President 33180  
☐ Vice President \_\_\_\_\_  
☐ Secretary ☐ Treasurer  
☒ Other: Technologist ☐ Other: \_\_\_\_\_

**NOTE: Important Notice:** Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

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

14. Alice Denise Feagins  
(Typed or printed name and capacity of person signing application)

12. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

**A. DIRECTORS**

☐ Chairman Name: Vanessa Ward  
☐ Vice Chairman Address: 134 NE 205 Terrace  
☐ Director North Miami Beach  
☒ President Florida 33179  
☐ Vice President \_\_\_\_\_  
☐ Secretary ☐ Treasurer  
☐ Other: \_\_\_\_\_ ☐ Other: \_\_\_\_\_

☐ Chairman Name: Erica Vizzo  
☐ Vice Chairman Address: 10104 Country  
☐ Director Brook Rd  
☐ President Boca Raton FL  
☐ Vice President 33428  
☒ Secretary ☐ Treasurer  
☐ Other: \_\_\_\_\_ ☐ Other: \_\_\_\_\_

☐ Chairman Name: JOSUE Philistin  
☐ Vice Chairman Address: 1776 NW 30st  
☐ Director Miami FL  
☐ President 33142  
☒ Vice President \_\_\_\_\_  
☐ Secretary ☐ Treasurer  
☐ Other: \_\_\_\_\_ ☐ Other: \_\_\_\_\_

☐ Chairman Name: \_\_\_\_\_  
☐ Vice Chairman Address: \_\_\_\_\_  
☐ Director \_\_\_\_\_  
☐ President \_\_\_\_\_  
☐ Vice President \_\_\_\_\_  
☐ Secretary ☐ Treasurer  
☐ Other: \_\_\_\_\_ ☐ Other: \_\_\_\_\_

☐ Chairman Name: \_\_\_\_\_  
☐ Vice Chairman Address: \_\_\_\_\_  
☐ Director \_\_\_\_\_  
☐ President \_\_\_\_\_  
☐ Vice President \_\_\_\_\_  
☐ Secretary ☐ Treasurer  
☐ Other: \_\_\_\_\_ ☐ Other: \_\_\_\_\_

☐ Chairman Name: \_\_\_\_\_  
☐ Vice Chairman Address: \_\_\_\_\_  
☐ Director \_\_\_\_\_  
☐ President \_\_\_\_\_  
☐ Vice President \_\_\_\_\_  
☐ Secretary ☐ Treasurer  
☐ Other: \_\_\_\_\_ ☐ Other: \_\_\_\_\_

**NOTE: Important Notice:** Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

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

14. Alice Denise Feagins  
(Typed or printed name and capacity of person signing application)

FILED  
2002 DEC -1 PM 4:15  
CLERK OF STATE  
JUDICIAL STATE

# STATE OF GEORGIA

## Secretary of State

Corporations Division

313 West Tower

2 Martin Luther King, Jr. Dr.

Atlanta, Georgia 30334-1530

### CERTIFICATE OF EXISTENCE

I, **Brad Raffensperger**, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

#### **THE HOUSE OF DIVINE HOPE, INC.**

a Domestic Nonprofit Corporation

was formed in the jurisdiction stated below or was authorized to transact business in Georgia on the below date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

Docket Number : 24062016  
Date Inc/Auth/Filed: 10/17/2009  
Jurisdiction : Georgia  
Print Date : 11/29/2022  
Form Number : 211

RECEIVED

DEC 1 2022

*Brad Raffensperger*

Brad Raffensperger





FLORIDA DEPARTMENT OF STATE  
Division of Corporations

November 22, 2022

ALICE DENISE FEAGINS  
19080 NW 27TH AVE UNIT 201  
MIAMI GARDENS, FL 33056

SUBJECT: THE HOUSE OF DIVINE HOPE, INC.  
Ref. Number: W22000145373

We have received your document for THE HOUSE OF DIVINE HOPE, INC. and check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The name listed in number one of the application must be identical to the name listed in the certificate of existence.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Mel Solomon  
Senior Section Administrator

Letter Number: 922A00025984

RECEIVED  
DEC 01 2022