(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	of Status
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COVER LETTER

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

SUBJECT: DIVINE INT	ERVENTION & PREVENTIO	N FOUNDATION, INC	
	(PROPOSED CORPORAT		DESUFFIX) NOT FOR PR
Enclosed is an original a	nd one(1) copy of the Articl	es of Incorporation and	a check for :
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate PPY REQUIRED
FROM:	KAYODE OKEWUSI Name (Pri	nted or typed)	_
	2044 UNIVERSITY BLVD N Ad	ddress	_
	JACKSONVILLE, FL 32211 City, S	tate & Zip	-
	904-207-1390 Daytime Tel	lephone number	_

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



FLORIDA DEPARTMENT OF STATE Division of Corporations

November 25, 2008

KAYODE OKEWUSI 2044 UNIVERSITY BLVD N JACKSONVILLE, FL 32211

SUBJECT: DIVINE INTERVENTION & PREVENTION FOUNDATION, INC

Ref. Number: W08000053206

We have received your document for DIVINE INTERVENTION & PREVENTION FOUNDATION, INC. However, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State.

Your document will be retained in our pending file.

The corporate filing fees for profit and nonprofit, domestic or foreign are as follows:

Filing Fees	\$35.00
Registered Agent	
Designation	\$35.00
Certified Copy	\$8.75
Certificate of Status	\$8.75

If you have any questions concerning the filing of your document, please call (850) 245-6933.

Dale White Regulatory Specialist II

Letter Number: 408A00058444

ARTICLES OF INCORPORATION FOR

DIVINE INTERVENTION & PREVENTION FOUNDATION, INC

The undersigned incorporator, for the purpose of forming a Florida N Corporation, hereby adopts the following Articles of Incorporation:

ARTICLE I

The name of the Corporation is: Divine Intervention & Prevention Foundation, Inc

ARTICLE II

The principal place of business address: 7620 Rivers Avenue, Suite 908 North Charleston, SC 29406

The mailing address of the Corporation is: P O Box 19976, Jacksonville Fl 32245

ARTICLE III

The specific purpose of which this Corporation is organized is: To provide guidance and counseling to families in the prevention of domestic violence. The foundation hope to provide an environment to develop the skills necessary needed in the typical family to address problems in non violent means.

ARTICLE IV

The manner in which directors are elected or appointed is/are: Initial board to be nominated by the incorporator and subsequently voted on by the Board.

ARTICLE V

The name and Florida Street address of the Registered Agent is: Katina Mickens 13091 Highland Glen Way East, Jacksonville Florida 32224

I certify that I am familiar with and accept the responsibilities of Registered Agent.

Registered Agent Signature:

ARTICLE VI

The name and address of the Incorporator is: Katina Mickens 13091 Highland Glen Way East, Jacksonville Florida 32224.

Incorporator's Signature:

ARICLE VII

Upon the dissolution of the Corporation, assets shall be distributed for one or more exempt purposes within the meaning of Section 501 (C) 3 of the Internal Revenue Code or corresponding Section of any future federal tax code, or shall be distributed to the federal government, or to a state or local government, for a public purpose. Any such assets not so disposed of shall be disposed of by a Court of Competent Jurisdiction of the County in which the principal office of the Corporation is then located, exclusively for such purposes or to such organization or organizations, as said Court shall determine, which are organized and operated exclusively for such purposes.