(Re	questor's Name)			
(Ad	dress)			
(Ad	dress)			
(Cit	y/State/Zip/Phone	<del></del>		
PICK-UP	☐ WAIT	MAIL		
(Bu:	siness Entity Nan	ne)		
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to	Filing Officer:			

Office Use Only



500210525715

10/03/11--01032--024 \*\*87.50

RECEIVED

## **COVER LETTER**

FILED

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

:

11 0CT -3 PH 1:49 SECRETARY OF STATE TALLAHASSEE, FLORIDA

SUBJECT: D	estiny's Le	gacy, Inc	
	(PROPOSED CORPORA	YPE NAME A <u>MUST INCLU</u>	DE SUFFIX)
Enclosed is an origina	I and one (I) copy of the Ar	ticles of Incorporation and	a check for:
\$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	

allo Carterwood Drive Tallahassec, Florida 37305

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

## ARTICLES OF INCORPORATION

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

ARTICLE I NA The name of the corpor	ation shall be: Desting's	1 ecous	Tine	FILED
ARTICLE II PR	INCIPAL OFFICE	re garg i	ا ۱۰ است	11 OCT -3 PM 1:49
	Principal street address  286 Cartawood Dive  Pullahossee, Florida 323	Þ5 <u>-</u>	Mailing	address, if different is: TALL AHASSEE, FLORIDA
	<u>URPOSE</u>			
The purpose for which	the corporation is organized is:	in areo	is of de	evelopment such as
Mentorin	g, Self Empowermen	t and 1	-ife Ski	ils
Will Cle	et d'irectors as st	ared w	ithin.	the bylaws.
ARTICLE IV M	ANNER OF ELECTION The manner in v	which the directors	are elected and a	ppointed:
Name and Title: Address:	Digard Lee Williams, Areside CED 2212 Curterwood Drive Tallahossee, Fl 32305	RS Mame and Title Address:	Ancla Vice Pro Vice Par Tallanas	Lee Williams Sident CFO LCCUXCOL Drive SCCIFI 32305
Name and Title:	Dorothy Ford 3514 Loro Lane 1a.11ahassee, F1 32310 Treasurer	Name and Title Address:	Berned 2011 Car Fallaba Secreta	terwood Drive 1550e, FT 32305
Name and Title:_ Address: _		Name and Title Address:	:	
			<del></del>	i a i de la
	Street address (P.O. Box NOT acceptable) of PNAON LEC WILLIAM SHOULD SEE TO 300		nt is:	
ARTICLE VII IN	CORPORATOR			•
The name and address Name: Address:	of the Incorporator is:  Angela Lee Williams  28th Carterwood Dr.  1211212205			
Having been named as	s registered agent to accept service of proces	s for the above s	stated corporation	at the place designated in this
ceruficale, i am familia	r with and accept the appointment as registere	ed agent and agree	•	•
Alynn >	Required Signature of Registered Agent		<u>/(</u>	Date Date
I submit this document	and affirm that the facts stated herein are tri	ie. I am aware th		Date
to the Department of St	ate constitutes a third degree felony as provide	ed for in s.817.155	5, F.S.	ONDINGHER OF A WOLSEFICHS
- TIL	ll a celled har	$\triangle x$	10	11500
( )	Required Signature of Incorporator	- U	<del></del> -	Date