

N 12000002732

(Requestor's Name)

(Address)

(Address)

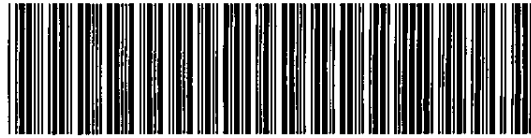
(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____



700222420707

02/24/12--01026--017 **78.75

FILED
12 MAR 12 PM 3:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Special Instructions to Filing Officer:

Leslie Livessy **CAVE**
AUTHORIZATION BY PHONE TO
CORRECT *Article IV*
DATE *3/13/12*
DOC. EXAM *MRD*

Office Use Only

MRD
3/13/12

1117-1114

COVER LETTER

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

SUBJECT: Operation DD

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is an original and one (1) copy of the Articles 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

FROM: Leslie Livesay
Name (Printed or typed)

9447 s.w. 144 ct.
Address

Miami, FL 33186
City, State & Zip

(305) 385-1010
9447 S.W. 144th. Telephone number

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

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



RECEIVED

12 MAR 12 PM 12:57

FLORIDA DEPARTMENT OF STATE
Division of Corporations

DIVISION OF CORPORATIONS

February 27, 2012

LESLIE LIVESAY
9447 S.W. 144 CT.
MIAMI, FL 33186

SUBJECT: OPERATION "DD"
Ref. Number: W12000011104

We have received your document for OPERATION "DD" and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name must contain a word that will clearly indicate that it is a corporation. This word may be: CORPORATION, CORP., INCORPORATED, or INC. Sections 617.0401(1)(a) and 617.1506(1), Florida Statutes, prohibits the use of the word COMPANY or CO. in the name of a non-profit corporation.

Section 617.0202(d), Florida Statutes, requires the manner in which directors are elected or appointed be contained in the articles of incorporation or a statement that the method of election of directors is as stated in the bylaws.

Please return the corrected original and one copy of 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.

Ruby Dunlap
Regulatory Specialist II
New Filing Section

Letter Number: 612A00007954

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

ARTICLE I NAME Operation "DD" Inc.
The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE

Principal <u>street</u> address	Mailing address, if different is:
<u>9447 S.W. 144 Ct.</u>	<u>9447 S.W. 144 Ct</u>
<u>Miami, FL 33186</u>	<u>Miami, FL 33186</u>

ARTICLE III PURPOSE
The purpose for which the corporation is organized is:
To aid people with Breast Cancer, by obtaining donations for their cause.

FILED
12 MAR 12 PM 3:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected and appointed:
Appointed

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: <u>Leslie Livesay/President</u>	Name and Title: <u>Jessica Vazquez/Vice President</u>
Address: <u>9447 S.W. 144 Ct.</u>	Address: <u>13970 S.W. 159 Terr.</u>
<u>Miami, FL 33186</u>	<u>Miami, FL 33177</u>
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: Leslie Livesay
Address: 9447 S.W. 144 Ct.
Miami, FL 33186

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Leslie Livesay
Address: 9447 S.W. 144 Ct.
Miami, FL 33186

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

Leslie Livesay
Required Signature of Registered Agent

02/21/12
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.

Leslie Livesay
Required Signature of Incorporator

02/21/12
Date