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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850) 617-6381

From:

Account Name : FASTKIT CORP
Account Number : 120100000009
Phone : (305) 599-0839
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****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

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16 AUG 16 PM 4:21

TALLAH

**FLORIDA PROFIT/NON PROFIT CORPORATION
DIACONAL SOCIETY, INC.**

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$78.75

Handwritten signature and date: 08/17/16

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

ARTICLE I NAME

The name of the corporation shall be: DIACONAL SOCIETY, INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address:
470 WEST PARK DRIVE APT 202
MIAMI FLORIDA 33172

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: A NOT-FOR-PROFIT CORPORATION ORGANIZED EXCLUSIVELY
FOR RELIGIOUS, CHARITABLE AND EDUCATIONAL PURPOSES

AS STATED IN

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

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: EDGARDO FARIAS, DIRECTOR Name and Title: _____

Address: 470 WEST PARK DRIVE APT 202 Address: _____
MIAMI FLORIDA 33172

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

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: EDGARDO JORGE FARIAS
Address: 470 WEST PARK DRIVE APT 202
MIAMI FLORIDA 33172

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: EDGARDO JORGE FARIAS
Address: 470 WEST PARK DRIVE APT 202
MIAMI FLORIDA 33172

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

Edgardo J. Farias
Required Signature of Registered Agent

8/15/2016

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.

Edgardo J. Farias
Required Signature of Incorporator

8/15/2016

Date