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(Address)

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(City/State/Zip/Phone #)

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(Business Entity Name)

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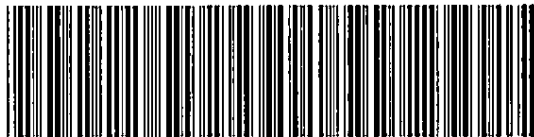
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RECEIVED
DEPT. OF REVENUE
17 JUL 13 PM 12:48

SECRETARY OF STATE
DIVISION OF CORPORATIONS
17 JUL 13 PM 12:59

COVER LETTER

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

SUBJECT: DIFFERENCE MAKING SOLUTIONS, INC.

(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: Belal Ghaffari

Name (Printed or typed)

2473 Dusky Court

Address

Tallahassee, Florida 32309-7014

City, State & Zip

(850) 363-1671

Daytime Telephone number

belal.ghaffari@gmail.com

E-mail address: (to be used for future annual report notification)

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 NAME

The name of the corporation shall be: DIFFERENCE MAKING SOLUTIONS, INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address:
2473 Dusky Court

Tallahassee, Florida 32309-7014

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: This corporation shall be organized and operated exclusively for charitable, scientific, literary, and educational purposes. Subject to the limitations stated in the Articles of Incorporation, the purposes of this corporation shall be to engage in all lawful activities, none of which are for profit, for which corporations may be organized under Title 26 United States Code, Subtitle A, Chapter 1, Subchapter F, Part 1, and Section 501(c)(3) of the Internal Revenue Code of the United States of America (or their corresponding future statutes). The primary purpose of Difference Making Solutions, Inc. is to identify specific needs in the community and provide services to the people who need it. Difference Making Solutions, Inc., exists to provide support and service to individuals and families not served or underserved by existing community outreach programs.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected and appointed: _____
The manner in which the directors are elected or appointed is in the bylaws.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Belal Ghaffari, Chief Financial Officer

Address: 2473 Dusky Court
Tallahassee, Florida 32309-7014

Name and Title: Rafiq Darji

Address: 9017 Glen Eagle Way
Tallahassee, FL 32312

Name and Title: Daryl Jaquette, Chief Executive Officer

Address: 3347 Golden Rain Drive
Tallahassee, Florida 32303

Name and Title: Thomas Alchediak

Address: 4740 South I-10 Service Rd West
Ste 300
Metairie, LA 70001

Name and Title: Jequaya Britton

Address: 3321 Freret Street
New Orleans, LA 70115

Name and Title: _____

Address: _____

17 JUL 13 PM 12:59
SECRETARY OF STATE
DIVISION OF CORPORATIONS

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: Daryl Jaquette
Address: 3347 Golden Rain Drive
Tallahassee, Florida 32303

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Belal Ghaffari
Address: 2473 Dusky Court
Tallahassee, Florida 32309-7014

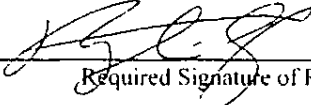
ARTICLE VIII EFFECTIVE DATE:

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 days prior or 90 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


Required Signature of Registered Agent

7/10/17
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.


Required Signature of Incorporator

7/10/17
Date