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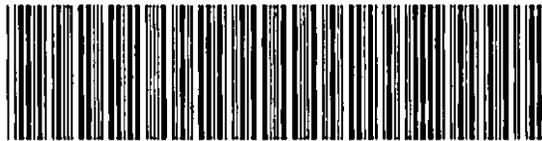
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# COVER LETTER

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

**SUBJECT:** Cultivating Joy 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:** Jill Daceus  
Name (Printed or typed)

225 NE 15th St  
Address

Homestead, FL 33030  
City, State & Zip

305-401-4744  
Daytime Telephone number

jdaceus@dadeschools.net

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: Cultivating Joy Inc.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address:

364 NW 6th Ave.

Mailing address, if different is:

Florida City, FL 33034

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: to cultivate joy amongst all contributing staff and to support one another especially in regards to holiday, births, deaths, and times of hardship.

**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: Jill Daceus/President

Name and Title: Samantha Roman/Secretary

Address: 225 NE 15th St

Address: 20470 SW 344 St

Homestead, FL 33030

Homestead, FL 33034

Name and Title: Melinda Taucher/VP

Name and Title: Luisa Olvera/Treasurer

Address: 976 NE 37th Pl

Address: 960 NW 12th St.

Homestead, FL 33033

Homestead FL 33030

Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Address: \_\_\_\_\_

2018 DEC 12 AM 11:02

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: Jill Daceus  
Address: 225 NE 15th St  
Homestead, FL 33030

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Jill Daceus  
Address: 225 NE 15th St  
Homestead, FL 33030

**ARTICLE VIII EFFECTIVE DATE:** 01/01/19

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*

Jill C. Daceus  
Required Signature of Registered Agent

12/16/18  
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.*

Jill C. Daceus  
Required Signature of Incorporator

12/16/18  
Date