

N23000003963

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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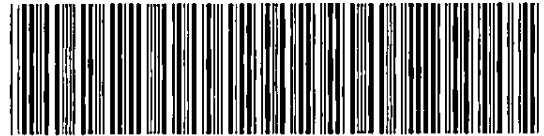
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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FILED  
2023 APR 10 PM 1:48 2023 APR 10 PM 1:32  
STATE OF FLORIDA  
TALLAHASSEE

## COVER LETTER

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

SUBJECT: Opulent Gems Incorporated  
(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: Ravan Pender  
Name (Printed or typed)

739 N Monroe Street  
Address

Tallahassee, FL 32303  
City, State & Zip

850-209-5057  
Daytime Telephone number

rcb2011@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: Opulent Gems Incorporated

**ARTICLE II PRINCIPAL OFFICE**

Principal street address:

Mailing address, if different is:

739 N Monroe Street

Tallahassee, FL 32303

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: This non profit focuses on equipping entrepreneurs and small business owners with resources and capital, while building a network of peers and mentors. Promoting financial education in young and middle aged adults who aren't familiar with financial literacy

**ARTICLE IV MANNER OF ELECTION** The manner in which the directors are elected and appointed: As provided for in the bylaws.

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Ravan Pender, President Name and Title: \_\_\_\_\_

Address: 739 N Monroe Street Address: \_\_\_\_\_  
Tallahassee, FL 32303

Name and Title: Kenderrick Pruitt, VP Name and Title: \_\_\_\_\_

Address: 739 N Monroe Street Address: \_\_\_\_\_  
Tallahassee, FL 32303

Name and Title: Tempera Watson, TREA Name and Title: \_\_\_\_\_

Address: 739 N Monroe Street Address: \_\_\_\_\_  
Tallahassee, FL 32303

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2023 APR 10 PM 1:48  
SECRETARY

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_ Address: \_\_\_\_\_  
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**ARTICLE VI REGISTERED AGENT**

Name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Ravan Pender, Founder  
Address: 739 N Monroe Street  
Tallahassee, FL 32303

**ARTICLE VII INCORPORATOR**

Name and address of the Incorporator is:

Name: Ravan Pender, Founder  
Address: 739 N Monroe Street  
Tallahassee, FL 32303

**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

Ravan Pender  
Required Signature of Registered Agent

4-10-2023  
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.

Ravan Pender  
Required Signature of Incorporator

4-10-2023  
Date

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SECRETARY OF STATE  
TALLAHASSEE, FL