

TRANSMITTAL LETTER

PO0000033845 3/28/00

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

100003190381--7
-03/30/00--01091--014
*****87.50 *****87.50

SUBJECT: Divine Enterprises I. 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 of
Status

ADDITIONAL COPY REQUIRED

FROM: Kevin Christopher Stephenson
Name (Printed or typed)

341 N. W. 153 Lane
Address

Pembroke Pines, Florida 33028
City, State & Zip

954-438-4482
Daytime Telephone number

FILED
00 MAR 30 AM 9:31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

CB
4-11-00
2

ARTICLES OF INCORPORATION

ARTICLE I - NAME

The name of this corporation is Divine Enterprises I Inc.

ARTICLE II - PRINCIPAL OFFICE

The mailing address of this corporation shall be:
341 N.W. 153rd Lane
Pembroke Pines, Florida 33028

ARTICLE III - SHARES

This corporation is authorized to issue 1,000 shares of \$1.00 par value common stock, which shall be designated as "Common Shares".

ARTICLE IV - INITIAL REGISTERED AGENT AND STREET ADDRESS


The name and Florida street address of the initial registered agent is:

Kevin Christopher Stephenson
341 N.W. 153rd Lane
Pembroke Pines, Florida 33028

ARTICLE V - INCORPORATOR

The name and address of the incorporator to theses Articles of Incorporation is:

Kevin Christopher Stephenson
341 N.W. 153rd Lane
Pembroke Pines, Florida 33028

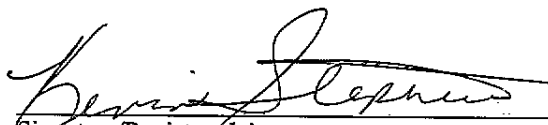


Signature/Incorporator

3/28/00

Date

Having been named as registered agent and to accept services of process for the above stated corporation at the place designed in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my positions as registered agent



Signature/Registered Agent

3/28/00

Date

FILED
00 MAR 30 AM 9:31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA