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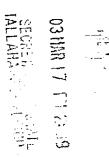
(Reque	stor's Name)		
(Address)			
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(City/St	ate/Zip/Phone	»#)	
PICK-UP] WAIT	MAIL	
(Business Entity Name)			
Ç- nomi-	-		
(Document Number)			
Certified Copies	Certificates	of Status	
Special Instructions to Filing Officer:			





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TRANSMITTAL LETTER

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

SUBJECT:	DIVINE PROPER	ties. Inc	
	(PROPOSED CORPORA)	te namez – <u>Musti incl</u> u	ioja StinaiX)
Enclosed are an orig	ginal and one (1) copy of the arti-	cles of incorporation and	a check for:
\$70.00	A \$78.75	□ \$78.75	□ \$87.50
Filing Fee	Filing Fee	Filing Fee	Filing Fee,
	& Certificate of Status	& Certified Copy	Certified Copy
			& Certificate of
	•		Status
		ADDITIONAL CO	PY REQUIRED
_			
FROM:	Evadgeline 6	ALPETT- WA Printed or typed)	1) 1
	Name (Printed or typed)	
	3776 H:11;		
	A	ddress	
	T 1. 00		
	JACKSONUIlle,	7L. 32217	
	City,	State & Zip	
	6 314	1	/
•	1904/ 646- 2299 (e)	904) 310-	5569 (CP)
	Daytime To	elephone number	

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



In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

Divino Proportion, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

3776 Hilliard RE.

JACKSONVIlle, FL. 32217

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To makage Rental property (houses, duplexo, etc.) for other individuals

Date

ARTICLE IV SHARES

The number of shares of stock is:

DAC (2)

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

Signature/Incorporator

ARTICLE VI REGISTERED AGENT			
The name and Florida street address of the registered agent	is:		
Linda b. EAFRETT			
1330 GRothe Street			
Jacksons: 16, FL. 32209			
ARTICLE VII INCORPORATOR			
The name and address of the Incorporator is:	• •		
Evangeline GARRETT- Walls			
3776 Hilliand Rd.			

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			
Sinda B. Barrett Signature/Registered Agent	3/17/03 Date		
Ma With Deniel sind and	3/17/03		