

P06880110184

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

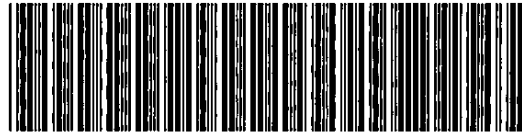
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

8-23-06
9056
99C

COVER LETTER

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

SUBJECT: Divine Insight Home Inspection, Inc.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are 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: Marie B. Dor

Name (Printed or typed)

183 Nw 54th Street

Address

Miami Fl 33127-1758

City, State & Zip

786-262-8207

Daytime Telephone number

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

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be:

Divine Insight Home Inspection, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

183 Nw 54th Street
Miami FI 33127-1758

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Any lawful purpose

ARTICLE IV SHARES

The number of shares of stock is:

500

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

Marie B. Dor, Pres.
183 Nw 54th Street
Miami FI 33127-1758

ARTICLE VI REGISTERED AGENT

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

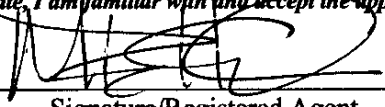
Marie B. Dor
183 Nw 54th Street
Miami FI 33127-1758

ARTICLE VII INCORPORATOR

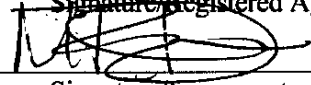
The name and address of the Incorporator is:

Marie B. Dor
183 Nw 54th Street
Miami FI 33127-1758

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



Signature/Registered Agent



Signature/Incorporator

8/17/06

Date

8/17/06

Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA