

Division of Corporations
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To:

Division of Corporations

Fax Number : (850) 617-6381

From:

Account Name : ROSALYN DUNLAP, ESQUIRE

Account Number: 120060000177
Phone: (407)290-1602
Fax Number: (407)292-8585

FLORIDA PROFIT/NON PROFIT CORPORATION

Divine Options, Inc.

Certificate of Status	0
Certified Copy	1
Page Count	6 1
Estimated Charge	\$78.75

MRD6/23

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COVER LETTER

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

SORTECT: Civille	(PROPOSED CORPOR	ATE NAME – <u>MUST INCI</u>	UDE SUFFEX)
Enclosed are an orig	ginal and one (1) copy of the art	ticles of incorporation and	a check for:
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	☑ \$78.75 Filing Fee & Certified Copy ADDITIONAL CO	Status PY REQUIRED
FROM: R	osalyn Dunlap Nam	e (Printed or typed)	
	P O Box 616705	*	
	Orlando, FL 32861	Address y, State & Zip	
	(407) 290-1602	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 Options, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal <u>street</u> address and mailing address, if different is: 1010 Terry Drive, Altamonte Springs, FL, 32714

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To do Business as a For Profit Organization

ARTICLE IV SHARES

The number of shares of stock is:

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s): Jean-Ann Moses, President, 1010 Terry Drive, Altamonte Springs, FL 32714 Danielle Moses, Vice-President, 1010 Terry Drive, Altamonte Springs, FL 32714

ARTICLE VI REGISTERED AGENT

The <u>name and Florida street address</u> (P.O. Box NOT acceptable) of the registered agent is: Jean-Ann Moses, President, 1010 Terry Drive, Altamonte Springs, FL 32714

ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is: Jean-Ann Moses, President, 1010 Terry Drive, Altamonte Springs, Ft. 32714

Having been named as pagistered 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

Manual M

08 JUN 20 AM 10:51

SECRETARY OF STATE TALLAHASSEE, FLORIDA