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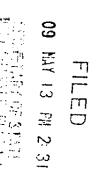
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Special Instructions to	Filing Officer:			





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# **COVER LETTER**

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

SUBJECT:	Chosen By Grace, Inc.			
	(PROPOSED CORPOR	ATE NAME – <u>MUST INCI</u>	LUDE SUFFIX)	
Enclosed are an orig	inal and one (1) copy of the art	icles of incorporation and	l a check for:	
\$70.00 Filing Fee	☑ \$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status  PPY REQUIRED	
FROM:	Jacinta Name	Baptiste-Jacobs (Printed or typed)	····	
	2103 Longfellow Court Address			
	Orlando, Fl 32818 City, State & Zip			
		286-0768 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:

Chosen By Grace, Inc.

#### ARTICLE II PRINCIPAL OFFICE

The principal <u>street</u> address and mailing address, if different is: 2103 Longfellow Court Orlando Fl 32818

#### ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Performing Arts

### ARTICLE IV SHARES

The number of shares of stock is: 1000 Shares

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

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

Jacinta Baptiste-Jacobs
Lana Campbell
Nyida McMichael-Febe
Aisha Carpenter

2103 Longfellow Court Orlando, Fl 32818
2103 Longfellow Court Orlando, Fl 32818
2103 Longfellow Court Orlando, Fl 32818

#### ARTICLE VI REGISTERED AGENT

The <u>name and Florida street address</u> (P.O. Box NOT acceptable) of the registered agent is: Jacinta Baptiste-Jacobs 2103 Longfellow Court Orlando, Fl 32818

## ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is:

Jacinta Baptiste-Jacobs 2103 Longfellow Court Orlando, Fl 32818

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

| Accept to accept the appointment as registered agent and agree to act in this capacity

| Signature/Registered Agent | Date |

5 | 11 | 09 Date