

P11000067722

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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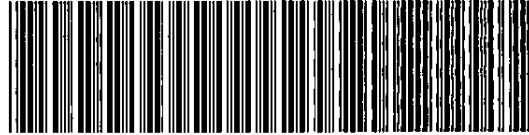
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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11 JUL 25 PM 4:06
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

R 07/27/11

COVER LETTER

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

SUBJECT: Diva Arts Dance Studio, 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: Shannon D. Haynes

Name (Printed or typed)

4888 NW 183rd Street, Suite #205

Address

Miami, Florida 33055

City, State & Zip

305-244-7686 or 786-426-0952

Daytime Telephone number

diva_arts11@hotmail.com

E-mail address: (to be used for future annual report notification)

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

Diva Arts Dance Studio, Inc.

The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE

Principal street address

Diva Arts Dance Studio, Inc.

4888 NW 183st, Suite #205

Miami, FL 33055

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Diva Arts Dance Studio, Inc. - To provide quality training in dance and to cultivate the natural potential of children and adults interested in the performing arts.

ARTICLE IV SHARES

The total number of shares available is 500.

The number of shares of stock is:

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Shannon D. Haynes

Address: 4331 NW 194 Street

Miami, Florida 33055

President/CEO

Name and Title: Adrienne D. Daniels

Address: 2606 SW 81 terrace

Miramar, Florida 33025

Vice-President/CEO

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: Adrienne D. Daniels

Address: 2606 SW 81st Terrace

Miramar, Florida 33025

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

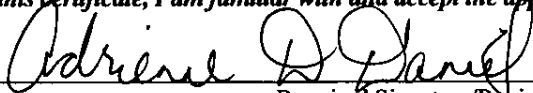
Name: Shannon D. Haynes

Address: 4331 NW 194 Street

Miami, Florida 33055

FILED
11 JUL 25 PM 1:06
SEC. OF STATE
TALLAHASSEE, FLORIDA

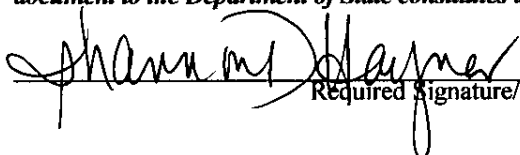
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Required Signature/Registered Agent

7/18/11
Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.



Required Signature/Incorporator

7/18/11
Date