## P13000041062

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
(404), 6 1111 1111 1111 1111					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					
Special instructions to Filling Officer.					

Office Use Only



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13 MAY -6 PH 4:47
SECRETARY OF STATE
ALL AHASSEF FLORIO.

- 05/07/13

## **COVER LETTER**

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

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:  \$70.00 \$78.75  Filing Fee Filing Fee & Certificate of Status  \$78.75 \$1 \$87.50  Filing Fee Filing Fee & Certificate of Status  \$2 \$78.75 \$2 \$87.50  Filing Fee Filing Fee & Certificate of Status  \$3 \$78.75 \$2 \$87.50  Filing Fee Filing Fee & Certificate Copy & Certificate of Status  \$4 \$70.00 \$2 \$78.75 \$3 \$87.50  ADDITIONAL COPY REQUIRED	SUBJECT: BRA	ADYBELLE ENTE		
\$70.00 \$78.75  Filing Fee Filing Fee & Certificate of Status  \$78.75		(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Filing Fee Filing Fee, & Certificate of Status  Filing Fee Filing Fee, & Certified Copy & Certificate of Status	Enclosed are an orig	inal and one (1) copy of the arti	cles of incorporation and	d a check for:
	- · · · ·	Filing Fee	Filing Fee & Certified Copy	Filing Fee, Certified Copy & Certificate of Status
FROM: CHERYL L BUTCHER  Name (Printed or typed)	FROM: C	HERYL L BUTCI	HER (Printed or typed)	
1370 MARSHALL ST	13		-	
MERRITT ISLAND, FL 32953	M	ERRITT ISLAND	, FL 32953	
City, State & Zip  321-848-5405  Daytime Telephone number	32	21-848-5405	•	<u> </u>

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

AARONCHERYL2001@YAHOO.COM

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

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

	ration shall be: DIVAD I DELLE I	ENTERPRISES	, INC.
<i>ticle II PI</i> 70 MARSHA	RINCIPAL OFFICE Principal street address		Mailing address, if different is:
	AND, FL 32953		
RTICLE III PU e purpose for which	IRPOSE h the corporation is organized is:	TOMIZE APPA	REL
			13 MAY SECRE FALLAH
			-6 PH II: ANSEE, FLO
RTICLE IV SI e number of shares	FIARES of stock is: 100		INTE ORIDA
TICLE V IN	IITIAL OFFICERS AND/OR DIREC	TORS	
Name and Ti			: AARON L BUTCHER, VICE PRESID
		DENT <sub>Name</sub> and Title	: AARON L BUTCHER, VICE PRESID
Name and Ti	ide: CHERYL L BUTCHER, PRESI		
Address	title: CHERYL L BUTCHER, PRESI 1370 MARSHALL ST MERRITT ISLAND, FL 32953	DENT Name and Title Address:	1370 MARSHALL ST
Address	title: CHERYL L BUTCHER, PRESI 1370 MARSHALL ST MERRITT ISLAND, FL 32953	DENT Name and Title Address:  Name and Title	1370 MARSHALL ST  MERRITT ISLAND, FL 32953
Address  Name and Tit	itle: CHERYL L BUTCHER, PRESI 1370 MARSHALL ST MERRITT ISLAND, FL 32953	DENT Name and Title Address:  Name and Title	MERRITT ISLAND, FL 32953
Address  Name and Tit  Address	MERRITT ISLAND, FL 32953	DENT Name and Title Address:  Name and Title Address:	MERRITT ISLAND, FL 32953
Address  Name and Tit  Address	MERRITT ISLAND, FL 32953	DENT Name and Title Address:  Name and Title Address:  Name and Title	MERRITT ISLAND, FL 32953

Name	and Title:	Name and Title:
Addro	ess	Address:
ARTICLE VI	REGISTERED AGENT	
The <u>name and</u>	Florida street address (P.O. Box NOT acceptable) of	f the registered agent is:
Name:	CHERYL L BUTCHER	-
Address:	1370 MARSHALL ST	_ =
	MERRITT ISLAND, FL 32953	
ARTICLE VI	II INCORPORATOR	VS 0
The <u>name and</u>	address of the Incorporator is:	
Name:	CHERYL L BUTCHER	STAT CORN
Address:	1370 MARSHALL ST	IDA A
	MERRITT ISLAND, FL 32953	<u>}</u>
	named as registered agent to accept service of process I am familiar with and accept the appointment as reg	s for the above stated corporation at the place designated in gistered agent and agree to act in this capacity
( Re	end Buletin	04/29/13
	Required Signature/Registered Agent	Date
	locument and affirm that the facts stated herein are ne Department of State constitutes a third degree felon	true. I am aware that the false information submitted in a ny as provided for in s.817.155, F.S.
(OAO	ul Butcher	04/29/13
	Required Signature/Incorporator	Date