

Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850) 617-6381

From: Account Name : DAVID C. HASTINGS, CPA, PA
Account Number : I20000000168
Phone : (727) 322-0909
Fax Number : (727) 322-0520

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: DAVIDCPA@Tampabay.FL.COM

FLORIDA PROFIT/NON PROFIT CORPORATION
DIAMOND DIVA, INC

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$78.75

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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No. 7227 P. 2

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: DIAMOND DIVA, INC

ARTICLE II PRINCIPAL OFFICE
Principal street address

2207 54TH ST S

GULFPORT, FL 33707

Mailing address, if different is

SAME

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ARTICLE III PURPOSE
The purpose for which the corporation is organized is: TO OPERATE A SPORTS AGENCY
BUSINESS AND ANY OTHER LEGAL BUSINESS IN THE STATE OF
FLORIDA.

ARTICLE IV SHARES
The number of shares of stock is: 1000 SHARES COMMON STOCK

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:	<u>NICOLE BANKS PST</u>	Name and Title:	_____
Address	<u>2207 54TH ST S</u>	Address:	_____
	<u>GULFPORT, FL 33707</u>		_____

Name and Title:	_____	Name and Title:	_____
Address	_____	Address:	_____

Name and Title:	_____	Name and Title:	_____
Address	_____	Address:	_____

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No. 7227 P. 3

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(cont.)

Name and Title: _____ Name and Title: _____
Address _____ Address: _____

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TALLAHASSEE, FLORIDA

ARTICLE VI REGISTERED AGENT

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

Name: DAVID C HASTINGS CPA
Address: 2207 54TH ST S
GULFPORT, FL 33707

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: DAVID C HASTINGS
Address: 2207 54TH ST S
GULFPORT, FL 33707

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

6/21/13
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

6/21/13
Date

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