

PI4000046511

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

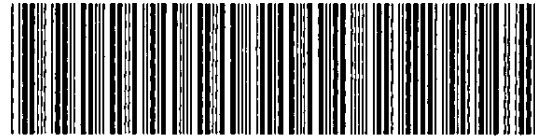
(Document Number)

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DIVISION OF CORPORATIONS  
FLORIDA

14 MAY 29 PM 2:30

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## COVER LETTER

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

SUBJECT: Chocolate Delights Entertainment 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: Jeanetta L. Lindsey  
Name (Printed or typed)

800 Ocala Rd. Ste. 300-157  
Address

Tallahassee, FL 32304  
City, State & Zip

850-296-2016  
Daytime Telephone number

j.lindsey@chocolate-delights-entertainment.com  
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**

The name of the corporation shall be: Chocolate De lights Entertainment Inc.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

800 Ocala Rd Ste. 300-157  
Tallahassee, FL 32304

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: Any and all lawfull business

14 MAY 29 PM 2:30  
STATE OF FLORIDA  
TALLAHASSEE

APPROVED  
FILED

**ARTICLE IV SHARES**

The number of shares of stock is: 3

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

Name and Title: Jeannette L. Lindsey / CEO Name and Title: Latoya Y. Spivey / COO

Address: 3535 Roberts Ave. Lot #1 Address: 1549 Half track St.  
Tallahassee, FL 32310 Tallahassee, FL 32310

Name and Title: Savannah R. Miller / CFO Name and Title: \_\_\_\_\_

Address: 3535 Roberts Ave Lot #1 Address: \_\_\_\_\_  
Tallahassee, FL 32310

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_ Address: \_\_\_\_\_

(cont.)

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_ Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

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

Name: Jeanetta Lindsey  
Address: 3535 Roberts Ave Lot #1  
Tallahassee, FL 32310

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Jeanetta L. Lindsey  
Address: 3535 Roberts Ave Lot #1  
Tallahassee, FL 32310

STATE OF FLORIDA  
DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

14 MAY 29 PM 2:30

APPROVED  
4/30/14  
6:50

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

JL Lindsey

Required Signature/Registered Agent

5/29/2014  
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.

JL Lindsey

Required Signature/Incorporator

5/29/2014  
Date