

P/L 000049217

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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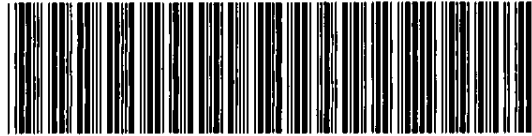
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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mn

COVER LETTER

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

SUBJECT: Diamond Standard Investment Group 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 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: Preston Trevon Maddox
Name (Printed or typed)

115 Bragg Dr.
Address

Tallahassee, FL 32305
City, State & Zip

850-212-9927
Daytime Telephone number

Trevon850@gmail.com
E-mail address: (to be used for future annual report notification)

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TALLAHASSEE, FLORIDA

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: Diamond Standard Investment Group Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

2229 Lake Bradford Rd

Same as

Tallahassee FL 32310

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Real estate investment and
development

ARTICLE IV SHARES

The number of shares of stock is: 1,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

CEO

Name and Title: Preston Trevon Maddox Name and Title: _____

Address

115 Bragg Dr.

Address: _____

Tallahassee FL 32305

President

Name and Title: Cleveland Preston Maddox Name and Title: _____

Address

115 Bragg Dr.

Address: _____

Tallahassee FL 32305

Vice President

Name and Title: Breyona Sharee Clark Name and Title: _____

Address

Address: _____

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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: Preston Trevan Maddox

Address: 115 Bragg Dr

Tallahassee FL 32305

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ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Preston Trevan Maddox

Address: 115 Bragg Dr

Tallahassee FL 32305

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

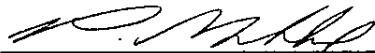


Required Signature/Registered Agent

6/7/16

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

6/7/16

Date