

P/6000091970

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

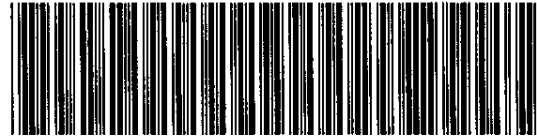
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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M. MOON  
NOV 15 2016

## COVER LETTER

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

**SUBJECT:** Developing Our Community 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:** Demetrius Walton  
\_\_\_\_\_  
Name (Printed or typed)  
  
3990 Sea Grape Circle  
\_\_\_\_\_  
Address  
  
Delray Beach, Florida 33445  
\_\_\_\_\_  
City, State & Zip  
  
561-889-4578  
\_\_\_\_\_  
Daytime Telephone number  
  
developingourcommunity@ymail.com  
\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
16 NOV 15 PM 5:47

**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: Developing Our Community Inc.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

3990 Sea Grape Circle

3990 Sea Grape Circle

Delray Beach, Florida 33445

Delray Beach, Florida 33445

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: to conduct any and all lawful business.

**ARTICLE IV SHARES**

The number of shares of stock is: 1000

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

Name and Title: Demetrius Walton, President

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

Address 3990 Sea Grape Circle

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

Delray Beach, Florida 33445

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

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

Address \_\_\_\_\_

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

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

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

Address \_\_\_\_\_

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

FILED  
STATE  
SECRETARY  
16 NOV 15 PM 5:47

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: Demetrius Walton  
Address: 3990 Sea Grape Circle  
Delray Beach, Florida 33445

**ARTICLE VII INCORPORATOR**

The **name and address** of the Incorporator is:

Name: Demetrius Walton  
Address: 3990 Sea Grape Circle  
Delray Beach, Florida 33445

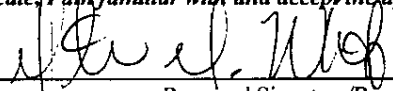
**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: January 1, 2017 (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.

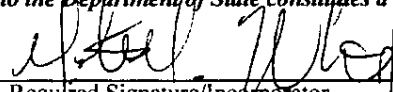
*Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity*

  
\_\_\_\_\_  
Required Signature/Registered Agent

November 1, 2016

\_\_\_\_\_  
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

November 1, 2016

\_\_\_\_\_  
Date

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FLORIDA