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FLORIDA DEPARTMENT OF STATE Division of Corporations

August 21, 2019

DAVID DONALD JOHNSON JR. POST OFFICE BOX 11 ARGYLE, FL 32422

SUBJECT: DIPLOMATIC ENTERPRISES, INC. Ref. Number: W19000077515

2019 SEP - 9 AH 11: 25

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<u>р</u> ----

We have received your document for DIPLOMATIC ENTERPRISES, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with an affidavit or letter stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

The document number of the name conflict is .

P30956

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Nadira D McClees-Sams Regulatory Specialist II

Letter Number: 319A00017275

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COVER LETTER

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

Diplometic Enterprises International, Inc. (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX) SUBJECT:

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 S78.75 Filing Fee & Certified Copy & Certified Copy & Certificate of Status & Certificate of ADDITIONAL COPY REQUIRED

David Donald Johnson Jr. Name (Printed or typed) FROM: POST OFFICE BOX 11 Argyle, Florida 32422 City. State & Zip 850 - 401 - 8270 Daytime Telephone number <u>david donnie johnson@gmail.com</u> E-mail address: (to be used for future affiual 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)

<u>ARTICLE 1 NAME</u> The name of the corpor	E ation shall be: Diplomatic Entr	erprises In	ternational Inc.
	<u>CIPAL OFFICE</u> Principal <u>street</u> address		Mailing address, if different is:
86 N Farks	Street	Pest	Office Box 11
DeFunick Sp	ring 5, FL 32435	Argy	le, FL 32422
<u>ARTICLE III PURI</u> The purpose for which	the corporation is organized is: <u>43 evec</u>	page in ani	1 lewful activity for
which corpor	rations may be incorpor	ated in thi	is state. The corporation
is for prof	it		51019
			ASS
			<u>N</u>
	<u>RES</u> f stock is: <u>(00000)</u> AL OFFICERS AND/OR DIRECTORS		
	10: David D. Johnson Jr. Aresident	Name and Title	David D. Johnson Jr. LEO
Address	86 N Park Street	Address:	86 N Park Street
	DeFunicik Springs, FL 324	35	DeFuniak Springs, FL 32435
Name and Title	e:	Name and Title	
Address			
		_	
		_	
Name and Title	<u></u>	Name and Title	·
Address		Address:	

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Name and Title	e:	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:

Daris L John Name: 20 Duebec A Address: Idrings 32433

ARTICLE VII_INCORPORATOR

The name and address of the Incorporator is: Name: Park Street Address: EFunial Springs, FL

SEP -9 MHII

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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 days prior or 90 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

lin

09/06/2019 Date

Required Signature/Registered Agent

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/Incorporate

09/06/2019 Date