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MIAMI,	FL 33169		
(City, State,	Zip) (Phone #)	OFFICE USE ONLY	
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			CRETA LOH OH FEB
CORPORATION NA	ME(s) & DOCUMENT NUMB	BER(S) (if known):	
1.	DIVINE INSPIRATI		PA CAPOR
	ration Name)	(Document #)	3:5
2.	•	(consult #1	ळ इंस
(Corpo.	ration Name)	(Document #)	
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NEW FILINGS	AMENDMENTS		,
Profit	Amendment	A Company of the Comp	ري.
NonProfit	Resignation of R.A., Officer/D	Director 2	1 5
Limited Liability	Change of Registered Agent	78	1
Domestication	Dissolution/Withdrawal	' ₆	⁵ ~\
Other	Merger		
			61
OTHER FILINGS	REGISTRATION/ QUALIFICATION	. /	
Annual Report	Foreign	$\leq \mathfrak{I}(\mathcal{S})$	1\
Fictitious Name	Limited Partnership	$\mathcal{I}\mathcal{I}$	V
Name Reservation	Reinstatement		
	Trademark		
	Other	Examiner's Initials	
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FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

January 27, 1995

TWANN DIXON 530 N.W. 189TH TERR. MIAMI, FL 33169

SUBJECT: DIVINE'S INSPIRATION Ref. Number: W95000002001

We have received your document for DIVINE'S INSPIRATION and your check(s) totaling \$122.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The corporate name must be identical throughout the document.

The corporate name must contain a suffix that will clearly indicate that it is a corporation. Such suffixes include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

The registered agent must sign accepting the designation.

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 (904) 487-6931.

Steven Godfrey Corporate Specialist

Letter Number: 095A00003627

ARTICLES OF INCORPORATION

QE

Divine Inspiration Incorporated

The undersigned incorporator(s), for the purpose of forming a corporation under the Elorida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation snail be:

Divine Inspiration Incorporated

SECRETARY OF STATE
OFFICE OR OF STATE
SECRETARY OF STATE
SECRETARY OF STATE
SECRETARY OF STATE

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

530 N.W. 1891n TERRACE MIAMI, FLORIDA 33169

ARTICLE III CAPITAL STOCK

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

One Thousand (1,000) shares of common stock having per value of one Dollar (\$1.00) each.

ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is:

Twann Dixon

530 N.W. 189th Terrace Miami, Florida 33169

ARTICLE V INCORPORATOR(S)

The name(s)	and street	address(es)	of the inc	orporator(s)	to these Article	s of Incorpora-
tion is(are):		,		• • • •	٠	•

Kevin Lewis

14135 Jefferson Street

Rhonda Lewis

14135 Jefferson Street

The undersigned has(have) executed these Articles of Incorporation this

• , ,	
Tuesday day of	<u>17</u> , 19 <u>95</u> .
	Koving Town President
	O Signature/Title
	Mean via nesilat
	//Signature/Title /
	Signature/Title

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of section 607.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the state of Florida.

1.	The name of the corporation is: Divine Inspiration Incorporated
2	The name and address of the section
٤.	The name and address of the registered agent and office is:
-	Twann Dixon
	(NAME)
	530 N.W. 189th Terrace
	(P.O. BOX NOT ACCEPTABLE)
	Miami, Florida 33169
	(CITY/STATE/ZIP)
	SIGNATURE JUGUN DIXI
	(corporate officer)
	TITLE KEGGSLOSE CEGENT
	DATE 111765
THI ANI PRO FOR	VING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF DCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN S CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT D AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE DVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERMANCE OF MY DUTIES, AND A AM FAMILIAR WITH AND ACCEPT THE OBLIGANS OF MY POSITION AS REGISTERED AGENT.
	SIGNATURE CULLIN / Cym 1
	DATE 11745 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3
	: 56
	REGISTERED AGENT FILING FEE: \$35.00