

P24000048403

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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WAIT

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MAIL

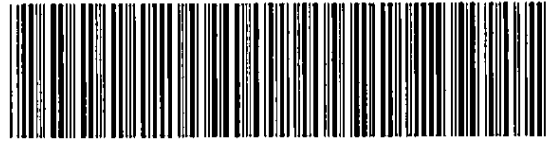
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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06/25/24--01001--007 **87.50



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24 JUN 25 PM 4:50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

W240000 97201

T-3H
6/28/24

COVER LETTER

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

SUBJECT: Divine Tile marble & more, 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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

24 JUN 25 PM 4:50

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FROM: Kevin Herring
Name (Printed or typed)

5400 SW 28 St
Address

West Park FL. 33023
City, State & Zip

305-332-0163
Daytime Telephone number

divine marble tile more inc@gmail.com
E-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:

Divine Tile marble & more,
INC

ARTICLE II PRINCIPAL OFFICE

5400 SW 28th
Principal street address

Mailing address, if different is:

5400 SW 28th

West Park, FL 33023

West Park, FL 33023

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Tile Installation

Residential & Commercial

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:

President / ceo
Kevin Herring

Name and Title:

Address

5400 SW 28th
West Park FL 33023

Address:

Name and Title:

Name and Title:

Address

Address:

Name and Title:

Name and Title:

Address

Address:

24 JUN 25 PM 4:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

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: Kevin Herring
Address: 5400 SW 28th
West Park FL 33023

ARTICLE VII INCORPORATOR

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

Name: Kevin Herring
Address: 5400 SW 28th
West Park FL 33023

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

Kevin Herring

Required Signature/Registered Agent

6/20/2024

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.

Kevin Herring

Required Signature/Incorporator

6/20/2024

Date

24 JUL 23 PM 4:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

Johnson, Arcedra

From: Kevin Herring [REDACTED]
Sent: Tuesday, July 23, 2024 1:32 PM
To: Johnson, Arcedra

EMAIL RECEIVED FROM EXTERNAL SOURCE

I Kevin Herring give Mrs Johnson promision to make corrections to my document. Kevin Herrring 7-23-2024 [REDACTED]

Sent from my iPhone