

P13000082520

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

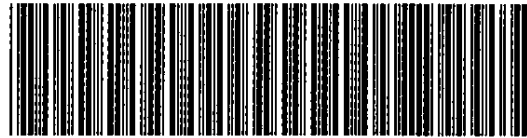
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



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10/07/13--01033--014 \*\*78.75

FILED  
13 OCT - 7 PM 2:03  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

MP  
10/8/13

**COVER LETTER**

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

**SUBJECT:** **Making Sense 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:** **Greg Whitbeck**  
Name (Printed or typed)  
**4136 Player Circle**  
Address  
**Orlando FL 32808**  
City, State & Zip  
**321-527-6831**  
Daytime Telephone number  
**gregorywhitbeck@yahoo.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)

**FILED**

**13 OCT -7 PM 2:03**

**ARTICLE I NAME**

The name of the corporation shall be: Making Sense Group, Inc.

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

4136 Player Circle

Orlando FL 32808

Mailing address, if different is:

P.O. Box 236

Goldenrod FL 32733

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: Publish, distribute and sell information through licensed individualized counseling, audio and video tapes or other current forms of media, to individuals seeking to simply be entertained or to just improve their lives.

**ARTICLE IV SHARES**

The number of shares of stock is: 1000

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

Name and Title: Greg Whitbeck

Name and Title: CEO

Address 4136 Player Cir.

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

Orlando FL 32808

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

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

Address \_\_\_\_\_

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

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

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

Address \_\_\_\_\_

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

(conti.)

Name and Title: \_\_\_\_\_ Name and Title: **FILED**  
Address: \_\_\_\_\_ Address: **13 OCT -7 11 2: 03**  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
**SECRETARY OF STATE**  
**TALLAHASSEE, FLORIDA**

**ARTICLE VI REGISTERED AGENT**

The **name and Florida street address** (P.O. Box NOT acceptable) of the registered agent is:


Name: Greg Whitbeck  
Address: 4136 Player Cir  
Orlando FL 32808

**ARTICLE VII INCORPORATOR**

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

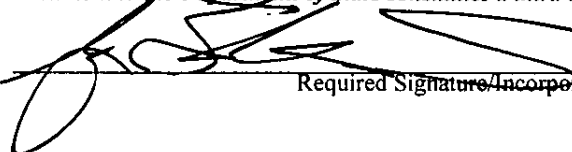
Name: Greg Whitbeck  
Address: 4136 Player Cir.  
Orlando FL 32808

*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

10-4-2013  
\_\_\_\_\_  
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

10-4-2013  
\_\_\_\_\_  
Date