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To:
Division of Corporations
Fax Number : (850)617-6381

From:
Account Name : GERALD WEINBERG, P.C.
Account Number : I20030000043
Phone : (800)342-9856
Fax Number : (800)354-3381

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

2022 JUN 14 AM 8:11
DIVISION OF STATE
NOTARIAL SERVICES, FLORIDA

**FLORIDA PROFIT/NON PROFIT CORPORATION
ANDREW MINUTA CONSULTING INC.**

Certificate of Status	0
Certified Copy	0
Page Count	02
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Corporate Filing Menu

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Jun. 14. 2022 3:32PM

GEALD WEINBERG

002071943)

No. 2639

P. 2

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: ANDREW MINUTA CONSULTING INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address

838 BROKEN SOUND PARKWAY NW

BOCA RATON, FL 33487

Mailing address, if different is:

838 BROKEN SOUND PARKWAY NW

BOCA RATON, FL 33487

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: ANY AND ALL LAWFUL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is: 200

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: ANDREW MINUTA, P

Name and Title:

Address

838 Broken Sound Parkway NW

Address:

Boca Raton, FL 33487

Name and Title:

Name and Title:

Address

Address:

Name and Title:

Name and Title:

Address

Address:

2022 JUN 14 AM 8:11
CLERK OF STATE
TALLAHASSEE, FLORIDA

(4220002071943)

Jun: 14. 2022 3:32PM

GEALD WEINBERG

002071943)

No. 2639 P. 3

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: ANDREW MINUTA

Address: 838 Broken Sound Parkway NW

Boca Raton, FL 33487

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: LAWRENCE A. KIRSCH

Address: 41 STATE STREET, SUITE 700

ALBANY, NEW YORK 12207

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

Required Signature/Registered Agent

06/14/2022

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.

Lawrence A. Kirsch

Required Signature/Incorporator

06/14/2022

Date

2022 JUN 14 AM 8:12
FILED
DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

(112200070718113)