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(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

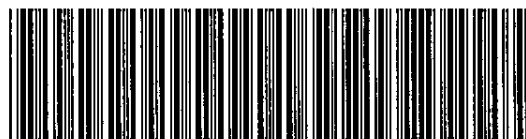
(Business Entity Name)

(Document Number)

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

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OCT 07 2016

**DAWSON LAW FIRM, P.C.**  
PRACTICAL LEGAL SOLUTIONS FOR BUSINESS

1844 Penfield Road  
Penfield, New York 14526

WWW.DLFPC.COM

Fax: (585) 348-9052  
Phone: (585) 381-8240

September 30, 2016

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Re: MindyAnn, Inc.;  
Application for Authority to Transact Business

Dear Sir or Madam:

On behalf of our client, MindyAnn, Inc., enclosed for filing is the Application for Authority to transact business in the State Florida for MindyAnn, Inc., as well as a check in the amount of \$78.75 to cover the filing fee & Certified Copy.

Please acknowledge receipt of this letter by date stamping the copy enclosed and returning it in the self-addressed, stamped envelope provided.

Very truly yours,



AnnMarie Balson

Enc.

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AnnMarie Balson

Enc.

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TALLAHASSEE, FLORIDA

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** MindyAnn, Inc.

\_\_\_\_\_  
Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Tricia Cifuentes-Ingles

\_\_\_\_\_  
Name of Person

Dawson Law Firm, P.C.

\_\_\_\_\_  
Firm/Company

1844 Penfield Road

\_\_\_\_\_  
Address

Penfield, NY 14526

\_\_\_\_\_  
City/State and Zip code

TCifuentes@dlfpc.com

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Tricia Cifuentes-Ingles

585 381-8240  
at ( )

\_\_\_\_\_  
Name of Person

\_\_\_\_\_  
Area Code

\_\_\_\_\_  
Daytime Telephone Number

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Enclosed is a check for the following amount:

- ☐ \$70.00 Filing Fee    ☐ \$78.75 Filing Fee & Certificate of Status    ☒ \$78.75 Filing Fee & Certified Copy    ☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy

**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT  
BUSINESS IN FLORIDA**

*IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO  
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.*

MindyAnn, Inc.

1. \_\_\_\_\_  
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"  
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

\_\_\_\_\_  
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. New York 3. \_\_\_\_\_  
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. September 21, 2016 5. \_\_\_\_\_  
(Date of incorporation) (Date of duration, if other than perpetual)

6. \_\_\_\_\_  
(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 2825 Business Center Blvd., Ste. C-3, Melbourne, FL 32940  
(Principal office address)
- 27 Starcrest Lane, Webster, New York 14580  
(Current mailing address, if different)

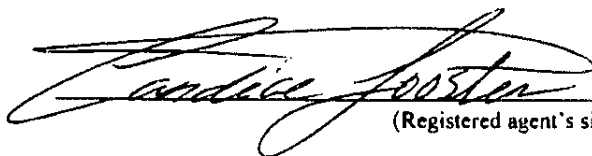
8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Candice Joosten *CJ*

Office Address: 2825 Business Center Blvd., Ste C-3  
Melbourne, Florida 32940  
(City) (Zip code)

**9. Registered agent's acceptance:**

*Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.*



(Registered agent's signature)

10. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

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TALLAHASSEE, FLORIDA

11. Names and business addresses of officers and/or directors:

**A. DIRECTORS**

Chairman: Michael Harris

Address: 27 Starcrest Lane, Webster, New York 14580

Vice Chairman: \_\_\_\_\_

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

Director: \_\_\_\_\_

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

Director: \_\_\_\_\_

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

**B. OFFICERS**

President: Michael Harris

Address: 27 Starcrest Lane, Webster, New York 14580

Vice President: \_\_\_\_\_

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

Secretary: Michael Harris

Address: 27 Starcrest Lane, Webster, New York 14580

Treasurer: Michael Harris

Address: 27 Starcrest Lane, Webster, New York 14580

**NOTE:** If necessary, you may attach an addendum to the application listing additional officers and/or directors.

12. M. Harris

Signature of Director or Officer

The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein are true and that he or she is aware that 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.

13. Michael Harris, President

(Typed or printed name and capacity of person signing application)

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STATE OF FLORIDA  
TALLAHASSEE, FLORIDA

**State of New York**  
**Department of State** } ss:

I hereby certify, that the Certificate of Incorporation of MINDYANN, INC. was filed on 09/21/2016, with perpetual duration, and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is an existing corporation.



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TALLAHASSEE, FLORIDA

\*\*\*

*WITNESS my hand and the official seal  
of the Department of State at the City of  
Albany, this 26th day of September two  
thousand and sixteen.*

A handwritten signature in dark ink, appearing to read "B. Fitzgerald", written over a horizontal line.

*Brendan W. Fitzgerald  
Executive Deputy Secretary of State*

DAWSON LAW FIRM, P.C.  
ATTN: ANNMARIE BALSON  
1844 PENFIELD RD.  
PENFIELD NY 14526

CUST REF: MAIL

*Enclosed is the information you requested. Your payment of \$50.00 is hereby acknowledged.*

*If the name on the enclosed document(s) does not match exactly with the name of the entity you requested, this office does not have a record of the exact name you requested. The document(s) provided appear(s) to be of sufficient similarity to be the entity requested.*

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