M2100008292

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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2021 JUN 29 AH II: 5/2021 JUN 29 AM IO: 10



Sunshine State Corporate Compliance Company

3458 Lakeshore Drive Tallahassee, Florida 32312 (850) 656-4724

DATE 6/29/2021		LK IN*:
ENTITY NAME	NATION OF THE CONTRACT OF THE	
DOCUMENT NUMBER		
DOCOMENT NOMBER		
	PLEASE FILE THE ATTACHED AND RETURN	
XXXXXXXX	Plain Copy	
	Certified Copy	
	Certificate of Status	
*	**PLEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY**	
	Certified Copy of Arts & Amendments	
	Certified Copy of Arts & Amendments Complete File (Including Annual Reports)	
	Certificate of Status	
	Certificate of Status Reflecting:	
	APOSTILLE' / NOTARIAL CERTIFICATION	
COUNTRY OF DESTINAT	TION	
NUMBER OF CERTIFICAT	TES REQUESTED	

eMindful Inc.

1. Desired Name: eMindful LLC

2. Conflicting Name: eMindful Inc.
Document Number: F05000005414

Address: 11315 Corporate Blvd.

Suite 210 Orlando, FL

32817

I hereby unconditionally grant consent to the use of the name "eMindful" to eMindful LLC and certify that I am authorized to sign this Consent and that by signing this Consent I am subject to the penalties of perjury as if I had signed this Consent under oath.

Dated this 28th day of June, 2021.

EMINDFUL INC.

By: Mary Pigatti

Its: Chief Executive Officer

COVER LETTER

And the second

Registration Section

TO:

SUBJECT:	Mindful LLC	
	Nan	ne of Limited Liability Company
The enclosed ". Existence, and	Application by Foreign Limited Liability check are submitted to register the above	Company for Authorization to Transact Business in Florida," Certificate referenced foreign limited liability company to transact business in Florida.
lease return al	ll correspondence concerning this matter (to the following:
	Annette Peterson-Ighinovia	
		Name of Person
	Fredrikson & Byron, P.A.	
		Firm/Company
	200 S. Sixth Street, Suite 4000	
		Address
	Minneapolis, MN 55402	
	C	City/State and Zip Code
	apeterson@fredlaw.com	
	E-mail address: (to be	e used for future annual report notification)
or further info	rmation concerning this matter, please ca	H:
Annett	te Peterson-Ighinovia	612 492-7785 at()
	Name of Contact Person	at () Area Code Daytime Telephone Number
Regis	g Address: tration Section ion of Corporations	Street Address: Registration Section Division of Corporations
	3ox 6327	The Centre of Tallahassee
Tallah	nassee, FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
Please	ed is a check for the following amount: make check payable to: FLORIDA DEP 5.00 Filing Fee \$130.00 Filing Fee Certificate o	e & 🗀 \$155.00 Filing Fee & 🗆 \$160.00 Filing Fee, Certificate

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

and the services of

IN COMPLIANCE WITH SECTION 605,0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

(If name unavailable, enter alternate	name adopted for the purpose of transacting business in l	Florida, The a	lternate name must include "Limited Liabil	lity Company," "L.L.C." or "I	.L.C.")
Delaware 2.		2			
(Jurisdiction under the law of v	which foreign limited liability company is organized	3.	(FEI number, i	if applicable)	
4					
	(Date first transacted business in Florida, if prior to (See sections 605,0904 & 605,0905, F.S. to determ	registration nine penalty l) iability)		
11315 Corporate Blvd 5.		6	11315 Corporate Blvd.		
5. (Street Address of Principal Office)		U. <u>-</u>	(Mailing Address)		
Suite 210			Suite 210		
Orlando, FL 32817		(Orlando, FL 32817		
7. Name and street addre	ss of Florida registered agent: (P.O. Bo	c <u>NOT</u> ac	rceptable)	2021 JU SECRI DAT	
Name:	Mary Pigatti			JUN 29 AM 10: 10 RETARY OF STATE AND JUN 29 AM 10: 10	
Office Address:	11315 Corporate Blvd., Suite 210		<u> </u>	AN IO	Ö
	Orlando		32817 , Florida	FAE I	ı
	(City)		(Zip code)		
designated in this applica	gistered agent and to accept service of j tion, I hereby accept the appointment a ions of all statutes relative to the proper	s register	ed agent and agree to act in to	his capacity. I furthe	er uvree
and accept the obligation	s oj my position as registerea agent.				
and accept the obligation	Mary Piga	tti			

8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]:

Title or Capacity:	Name and Address:	Title or Capacity:	Name and Address:
□Manager	Name: eMindful Inc.	□Manager	Name: Mary Pigatti
■Member	Address: 11315 Corporate Blvd.	□Member	Address: 11315 Corporate Blvd.
□Authorized	Suite 210	□Authorized	Suite 210
Person	Orlando, FL 32817	Person	Orlando, FL 32817
□Other	Other	■Other President	Other
□Manager	Name:	□Manager	Name:
□Member	Address:	□Member	Address:
□Authorized		□Authorized	
Person		Person	
□Other	Other	□Other	Other
□Manager	Name:	□Manager	Name:
□Member	Address:	□Member	Address:
□Authorized		□Authorized	
Person		Person	
□Other	Other	□Other	Other

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

- 9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)
- 10. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any 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.

Mary Pigatte		
9-0	Signature of an authorized person	
Mary Pigatti, President		
	Typed or printed name of signee	



Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "EMINDFUL LLC" IS DULY FORMED UNDER THE

LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A

LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF

THE TWENTY-EIGHTH DAY OF JUNE, A.D. 2021.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "EMINDFUL LLC" WAS FORMED ON THE TWENTY-THIRD DAY OF JUNE, A.D. 2021.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN ASSESSED TO DATE.

Authentication: 203552514

Date: 06-28-21

6024119 8300 SR# 20212568860