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Florida Department of State

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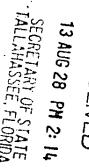
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FLORIDA PROFIT/NON PROFIT CORPORATION

MIND OVER MATTER TEAM INC.

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August 28, 2013

FLORIDA DEPARTMENT OF STATE

EXPRESS CORPORATE FILING SERVICE INC.

SUBJECT: MIND OVER MATTER TEAM INC.

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Ruby Dunlap Regulatory Specialist II New Filing Section FAX Aud. #: H13000190613 Letter Number: 313A00020471

ARTICLES OF INCORPORATION
In compliance with Chapter 617, F.S., (Not for Profit)

| The name of t | he corporation shall be: MIND OVE | R MATTER TEAM INC. |
|---------------------------------------|--|---|
| ARTICLE I | I PRINCIPAL OFFICE | |
| 21 | Principal street address: 00 W. 76th STREET | Mailing address, if different is: SAME |
| SI | JITE: 210 | |
| HI | ALEAH, FL 33016 | |
| ARTICLE I | | |
| | for which the corporation is organized is: ATION PROGRAM FO | R KIDS AGES ON LEARNING |
| | IEERING AND BUILDI | · · · · · · · · · · · · · · · · · · · |
| | | |
| | | · |
| | | |
| | | |
| ARTICLE I | V MANNER OF ELECTION The m | anner in which the directors are elected and appointed: |
| · · · · · · · · · · · · · · · · · · · | JTES AND BY-LAWS | amer in which the directors are elected and appointed. |
| | | |
| | V INITIAL OFFICERS AND/OR DE | RECTORS |
| Name and Tit | le: IRIS SUARE Z (P/D) | Name and Title: |
| Address | 2100 W. 76th STREET | Address: |
| | SUITE: 210 | |
| * | HIALEAH, FL 33016 | |
| Name and Tit | : | Name and Title: |
| Address | | Address: |
| | | |
| | | |
| Name and Tit | ile: | Name and Title: |
| Address | | Address: |
| | | |
| | | |

10 C

| Name and Titic: | | Name and Titl≪_ | · · · · · · · · · · · · · · · · · · · | |
|---|---|--|---|------------------------|
| Address | | Address: | | · |
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| -4 AMI 4 | | Manua an é Tisto. | | |
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| Address | | Address: | | |
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| | | | | |
| ARTRCLE VI | <u>REGISTERED AGENT</u> <u>ida streat address</u> (P.O. Box NOT accep | table) of the registo | red agent is: | |
| Name: | IRIS SUAREZ | | | |
| Address: | 2100 W. 76 STREET STE | 210 | | |
| | HIALEAH, FL 3301 | 6 | | |
| ARTICLE VII | INCORPORATOR | | | |
| The name and add | ress of the Incorporator is: | | | |
| Name: | IRIS SUAREZ | - | | |
| Address: | 2100W. 76 STREET STE | 210 | | |
| | HIALEAH, FL 3301 | 6 | | |
| Having been name | ed as registered agains to accept service o | f process for the d | ibove stated corporation at the pi | uce designated to this |
| certificute, I am fai | ntitier with and accept the appointment as | registered agent a | nd agree to act in this capacity | • |
| 8) (- | - | - | <u>08-26-</u> | 2013 |
| | Required Signature of Registeres | \gent . | Da | ita |
| I submit this docum to the Department; | ters and affirm that the facts stated herei of State constitutes a third dayres falony a | n are true. I am an is provided for in s. | rare that any false information su 817.)35, F.S. | bmitted in a document |
| D. | | | 08-26- | 2013 |
| | Required Signature of incomp | prator | Q | ato |