

PD1000027748

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

SUBJECT: Monthly Mingles Inc.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

200003852652--9
-03/14/01--01067--006
*****78.75 *****78.75

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

☒ \$70.00 Filing Fee
☒ \$78.75 Filing Fee & Certificate of Status

☐ \$78.75 Filing Fee & Certified Copy
☐ \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED

FROM: FRAN SINDONI
Name (Printed or typed)
3434 Wilson DR
Address
Holiday FL 34691
City, State & Zip
727-939-2244
Daytime Telephone number

FILED
2001 MAR 14 AM 9:20
SECRETARY OF STATE
TALLAHASSEE FLORIDA

NOTE: Please provide the original and one copy of the articles.

3/19/01

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:

Monthly Mingles Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

3434 Wilson DR
Holiday FL 34691

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To Run a for-profit business in Florida

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

FRAN SINDONI
3434 Wilson DR
Holiday FL 34691

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TALLAHASSEE FLORIDA

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

FRAN SINDONI
3434 Wilson DR
Holiday FL 34691

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

FRAN SINDONI
3434 Wilson DR
Holiday FL 34691

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

Fran Sindoni

Signature/Registered Agent

3/12/01

Date

Fran Sindoni

Signature/Incorporator

3/12/01

Date