

P07000024539

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

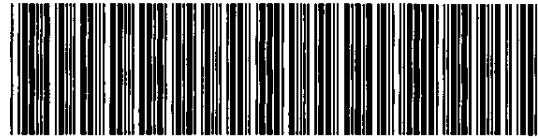
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. Burch FEB 23 2007

COVER LETTER

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

SUBJECT: Peace Of Mind Land Investment,
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX) Inc.

Enclosed are 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: M.M. Dominguez
Name (Printed or typed)

7589 Sand Lake Pointe Loop #203
Address

Orlando FL 33809
City, State & Zip

407-862-4545
Daytime Telephone number

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

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:

Peace Of Mind Land Investment, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/ mailing address is:

7589 Sand Lake Pointe Loop # 203
Orlando FL 32809

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: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

M. M. Dominguez - President
7589 Sand Lake Pointe Loop # 203
Orlando FL 32809

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:


M. M. Dominguez
7589 Sand Lake Pointe Loop # 203
Orlando FL 32809


ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

M. M. Dominguez -
7589 Sand Lake Pointe Loop # 203
Orlando FL 32809

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



Signature/Registered Agent


Signature/Incorporator

2/20/07
Date
2/20/07
Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA