

PO7000094628

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: DISTINCTIVE ^{MINDS} ~~MIND~~ INCORPORATED
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

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: ELAINE SEGURA

Name (Printed or typed)

2163 SW 87TH TERRACE

Address

MIRAMAR FLORIDA 33025

City, State & Zip

954 829 4581

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:

DISTINCTIVE MINDS INCORPORATED

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

2163 SW 87TH TERRACE
MIRAMAR FL 33025

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

COUNSELLING, GRAPHIC-DESIGN & PRINTING

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):

ELAINE SEGURA - PRESIDENT
DELWING MANZUETA - OFFICER

ARTICLE VI REGISTERED AGENT

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

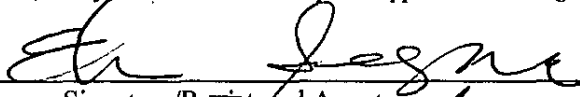
ELAINE SEGURA
2163 SW 87TH TERRACE
MIRAMAR FL 33025

ARTICLE VII INCORPORATOR

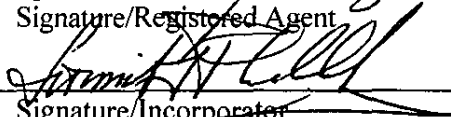
The name and address of the Incorporator is:

SWINTON S PHILLIP
12951 NW 1ST STREET STE104
PEMBROKE PINES FL 33028

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

8/18/07

Date
8/18/07

Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA