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(Requestor's Name)

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(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐

PICK-UP

☐

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\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

10 MAR 29 PM 2:44

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## COVER LETTER

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

SUBJECT: Global Grins, Inc.  
(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: Donna Des Isles  
Name (Printed or typed)

25 N Pineapple Ave.  
Address

Sarasota, FL 34236  
City, State & Zip

941-504-2124  
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:

Global Grins, Inc.

### **ARTICLE II PRINCIPAL OFFICE**

The principal street address and mailing address, if different is:

25 N Pineapple Ave.  
Sarasota, FL 34236

### **ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

The purpose of the corporation is to conduct any lawful purpose or purposes.

### **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):

Donna Des Isles - President - 25 N Pineapple Ave., Sarasota, FL 34236

### **ARTICLE VI REGISTERED AGENT**

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

Donna Des Isles - 25 N Pineapple Ave., Sarasota, FL 34236

### **ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Donna Des Isles - 25 N Pineapple Ave., Sarasota, FL 34236

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SECRETARY OF STATE  
TALLAHASSEE, FL 32304

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*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*

Donna Des Isles

Signature/Registered Agent

Donna Des Isles

Signature/Incorporator

3/5/10

Date

3/5/10

Date