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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. Burch JUL 20 2011

COVER LETTER

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

SUBJECT: Healthy Minds by Design, 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: Ana Leticia G. Lopes
Name (Printed or typed)
8402 SW 162 Terrace
Address
Miami, FL 33157
City, State & Zip
305-510-6724
Daytime Telephone number
analeticia@me.com
E-mail address: (to be used for future annual report notification)

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

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be: **Healthy Minds by Design, Inc.**

ARTICLE II PRINCIPAL OFFICE

Principal ~~street~~ address
8402 SW 162 Terrace
Miami, FL 33157

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Provide psychological services, counseling, teaching, training, etc.

ARTICLE IV SHARES

The number of shares of stock is: **100**

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: **Ana Leticia G. Lopes, President**
Address: **8402 SW 162 Terrace**
Miami, FL 33157

Name and Title: _____
Address: _____

Name and Title: **Ana Leticia G. Lopes, Secretary**
Address: **8402 SW 162 Terrace**
Miami, FL 33157

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: **Ana Leticia G. Lopes**
Address: **8402 SW 162 Terrace**
Miami, FL 33157

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: **Ana Leticia G. Lopes**
Address: **8402 SW 162 Terrace**
Miami, FL 33157

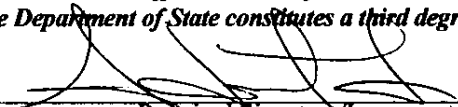
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity


Required Signature/Registered Agent

12 July 2011

Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.


Required Signature/Incorporator

12 June 2011

Date

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TALLAHASSEE, FLORIDA