

P13000082520

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

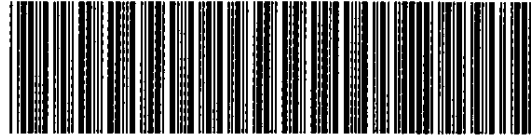
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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13 OCT - 7 PM 2: 03  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

MRS  
10/8/13



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

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13 OCT -7 PM 2:03

**ARTICLE I NAME**

The name of the corporation shall be: Making Sense Group, Inc.

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

4136 Player Circle

Orlando FL 32808

Mailing address, if different is:

P.O. Box 236

Goldenrod FL 32733

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: Publish, distribute and sell information through licensed individualized counseling, audio and video tapes or other current forms of media, to individuals seeking to simply be entertained or to just improve their lives.

**ARTICLE IV SHARES**

The number of shares of stock is: 1000

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Greg Whitbeck Name and Title: CEO

Address 4136 Player Cir. Address: \_\_\_\_\_  
Orlando FL 32808 \_\_\_\_\_

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address \_\_\_\_\_ Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address \_\_\_\_\_ Address: \_\_\_\_\_

FILED

|                       |                                |
|-----------------------|--------------------------------|
| Name and Title: _____ | Name and Title: _____          |
| Address _____         | Address: <u>13 OCT -7 2:03</u> |
| _____                 | SECRETARY OF STATE             |
| _____                 | TALLAHASSEE, FLORIDA           |

**ARTICLE VI REGISTERED AGENT**

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

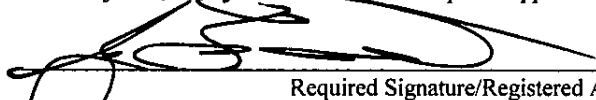
Name: Greg Whitbeck  
 Address: 4136 Player Cir  
Orlando FL 32808

**ARTICLE VII INCORPORATOR**

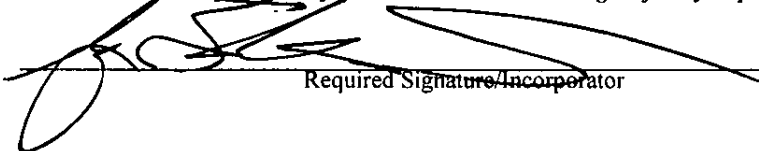
The name and address of the Incorporator is:

Name: Greg Whitbeck  
 Address: 4136 Player Cir.  
Orlando FL 32808

*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 10-4-2013  
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 10-4-2013  
Date