

P17000064420

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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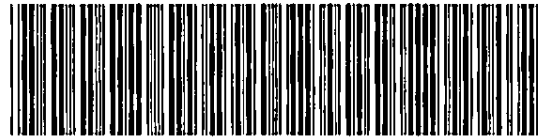
(Business Entity Name)

(Document Number)

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

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STATE  
FLORIDA

08/01/17

## COVER LETTER

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

**SUBJECT:** MENTOR PROTECTION SERVICES, 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:** KENSON MENTOR  
\_\_\_\_\_  
Name (Printed or typed)

18525 NW 39TH AVE  
\_\_\_\_\_  
Address

MIAMI GARDENS, FL 33055  
\_\_\_\_\_  
City, State & Zip

786-803-3057  
\_\_\_\_\_  
Daytime Telephone number

kensonmentor@yahoo.com  
\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

**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: MENTOR PROTECTION SERVICES, INC.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

18525 NW 39TH AVE

MIAMI GARDENS, FL 33055

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: TO PROVIDE EMPLOYMENT AND SERVICE FOR THE PUBLIC.

TO BUY SELL, RENT, LEASE, WHOLESALE AND RETAIL, TRADE, MANAGE AND AUCTION ALL TYPES OF

REAL ESTATE PROPERTIES. TO MANAGE REAL ESTATE PROPERTIES, TO DEVELOP, BUILD, CONSTRUCT

AND DESIGN SPECIAL ORDER BUILDING PROJECTS. TO INVEST IN ALL TYPES OF PUBLISHING,

ADVERTISING AND PROMOTIONAL VENTURES, INCLUDING VARIOUS INTELLECTUAL PROPERTIES.

TO INVEST IN ANY AND ALL LEGAL MONEY MAKING ENTITIES AND IDEAS FOR PROFIT WITHOUT

RESTRICTION, WITHOUT PERSONAL GUARANTOR YET WITHIN THE LAW.

**ARTICLE IV SHARES**

The number of shares of stock is: 1

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

Name and Title: KENSON MENTOR, PRESIDENT

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

Address 18525 NW 39TH AVE

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

MIAMI GARDENS, FL 33055

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

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

Address \_\_\_\_\_

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

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

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

Address \_\_\_\_\_

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

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

**ARTICLE VI REGISTERED AGENT**

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

Name: KENSON MENTOR  
Address: 18525 NW 39TH AVE  
MIAMI GARDENS, FL 33055

**ARTICLE VII INCORPORATOR**

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

Name: KENSON MENTOR  
Address: 18525 NW 39TH AVE  
MIAMI GARDENS, FL 33055

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**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: \_\_\_\_\_ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

*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*

Kenson Mentor 7/27/17  
Required Signature/Registered Agent 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.*

Kenson Mentor 7/27/17  
Required Signature/Incorporator Date