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FLORIDA PROFIT/NON PROFIT CORPORATION
MINDPLACE, CORPORATION

Certificate of Status	0
Certified Copy	1
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20 MAR 16 4:11:11
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20 MAR 16 PM 1:17
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ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act; Hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

MINDPLACE, CORPORATION

ARTICLE II PRINCIPAL OFFICE

The principle place of business and mailing address of this corporation shall be:

4210 NW 107 AVE APT # 1401
DORAL, FL 33178

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: FIVE (500) HUNDRED SHARES ONE DOLLAR (1) PER VALUE COMMON STOCK

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

ANDREA CAROLINA NEGRON MORA
4210 NW 107 AVE APT # 1401
DORAL, FL 33178

ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is (are):

ANDREA CAROLINA NEGRON MORA
4210 NW 107 AVE APT # 1401
DORAL, FL 33178

ARTICLE VI DIRECTOR(S)

The name(s) and street address(es) of the director(s) to these Articles of Incorporation is (are):

ANDREA CAROLINA NEGRON MORA (PRESIDENT & SECRETARY)
4210 NW 107 AVE APT # 1401
DORAL, FL 33178

The undersigned incorporator(s) has (have) executed these Articles of Incorporation this 13 day of MARCH 2020 .

X Andrea Negron
Signature

Signature

Signature

SECRET
FALL 2020

20 MAR 16 AM 11:41

FILED

CERTIFICATE OF DESIGNATION
REGISTERED AGENT/ REGISTERED OFFICE

Pursuant to the provisions of sections 607.0501 or 617.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

1. The name of the corporation is:
MINDPLACE, CORPORATION

2. The name and address of the registered agent and office is:
ANDREA CAROLINA NEGRON MORA

(NAME)

4210 NW 107 APT # 1401

(P.O. BOX NOT ACCEPTABLE)

DORAL, FL 33178

(CITY/STATE/ZIP)

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

SIGNATURE x Andrea Negron

DATE _____