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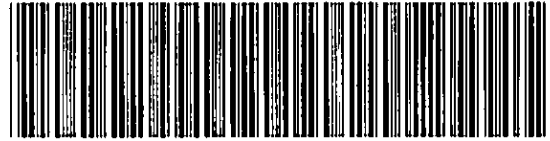
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**FLORIDA PROFIT BENEFIT CORPORATION**  
**COVER LETTER**

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

**SUBJECT:** MAMA T CARES 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      ☐ \$78.75  
Filing Fee      Filing Fee  
                         & Certificate of Status

☐ \$78.75      ☐ \$87.50  
Filing Fee      Filing Fee,  
& Certified Copy      Certified Copy  
                         & Certificate of  
                         Status

**ADDITIONAL COPY REQUIRED**

**FROM:** ASHLEY V. BREWER

Name (Printed or typed)

407 WEKIVA SPRINGS RD. STE 241

Address

LONGWOOD, FLORIDA 32779

City, State & Zip

407-660-2964

Daytime Telephone number

ASHLEY@BREWERLONG.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 FOR FLORIDA PROFIT BENEFIT CORPORATION**

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

**ARTICLE I NAME**

The name of the benefit corporation shall be: MAMA T CARES INC.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address  
9100 CONROY WINDERMERE ROAD, SUITE 200  
WINDERMERE, FLORIDA 34786

Mailing address, if different is:

**ARTICLE III BENEFIT STATEMENT AND BUSINESS PURPOSE**

The corporation elects to be a benefit corporation in accordance with s. 607.603, F.S.

The purpose for which the corporation is organized is to create a general public benefit and:

ANY AND ALL LAWFUL BUSINESS.

The general and/or specific public benefit(s) to be created by the corporation (in addition to its general purpose) is/are as follows (optional):

(1) PROVIDING LOW-INCOME OR UNDERSERVED INDIVIDUALS OR COMMUNITIES WITH BENEFICIAL

PRODUCTS OR SERVICES;

(2) PROTECTING OR RESTORING THE ENVIRONMENT;

(3) IMPROVING HUMAN HEALTH; AND

(4) ANY OTHER PUBLIC BENEFIT CONSISTENT WITH THE PURPOSES OF THE BENEFIT CORPORATION.

**ARTICLE IV SHARES**

The number of shares of stock is: 10,000

**ARTICLE V INITIAL OFFICERS, DIRECTORS, BENEFIT DIRECTOR AND BENEFIT OFFICER (if Applicable)**

Name and Title: ASHLEY MATHIEU, PRESIDENT

Name and Title: TYAIRRA LANAIYA GUNN, VP

Address: 10195 ANACORA CIRCLE #2115  
ORLANDO, FLORIDA 32821

Address: 2265 CASA VERANO WAY  
APT #203  
KISSIMMEE, FLORIDA 34744

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

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

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

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

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

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

If applicable, BENEFIT DIRECTOR:

Name : ASHLEY MATHIEU

Address 10195 ANCORA CIRCLE #2115

ORLANDO, FLORIDA 32821

If applicable, BENEFIT OFFICER:

Name: \_\_\_\_\_

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

**ARTICLE VI REGISTERED AGENT**

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

Name: BREWERLONG PLLC

Address: 407 WEKIVA SPRINGS RD, STE 241

LONGWOOD, FLORIDA 32779

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: ASHLEY MATHIEU

Address: 10195 ANCORA CIRCLE #2115

ORLANDO, FLORIDA 32821

**ARTICLE VIII ADDITIONAL QUALIFICATIONS OF BENEFIT DIRECTOR, IF ANY:**

So long as there is only one (1) shareholder of the Corporation, and the single shareholder is also the Benefit Director,

the Benefit Director shall be exempt from the opinion report described in Section 607.608(3), Florida Statutes.

*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

5/3/2022  
\_\_\_\_\_  
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.*

149 7/20  
\_\_\_\_\_  
Required Signature/Incorporator

May 2, 2022

\_\_\_\_\_  
Date