

# **Electronic Articles of Incorporation For**

P24000029060  
FILED  
April 23, 2024  
Sec. Of State  
rlrichardson

GENTLE MINDS FAMILY CLINIC CORP

The undersigned incorporator, for the purpose of forming a Florida profit corporation, hereby adopts the following Articles of Incorporation:

## **Article I**

The name of the corporation is:

GENTLE MINDS FAMILY CLINIC CORP

## **Article II**

The principal place of business address:

2110 SW 12 TERRACE  
CAPE CORAL, FL. 33991

The mailing address of the corporation is:

PO BOX 960244  
MIAMI, FL. 33296

## **Article III**

The purpose for which this corporation is organized is:

MENTAL HEALTH SERVICES AND FAMILY MEDICAL SERVICES

## **Article IV**

The number of shares the corporation is authorized to issue is:

1

## **Article V**

The name and Florida street address of the registered agent is:

SANDRA M DELGADO  
2110 SW 12 TERRACE  
CAPE CORAL, FL. 33991

I certify that I am familiar with and accept the responsibilities of registered agent.

Registered Agent Signature: SANDRA M DELGADO

## **Article VI**

The name and address of the incorporator is:

SANDRA M DELGADO  
2110 SW 12 TERRACE

CAPE CORAL, FL, 33991

Electronic Signature of Incorporator: SANDRA M DELGADO

I am the incorporator submitting these Articles of Incorporation and affirm that the facts stated herein are true. I am aware that 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. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of this corporation and every year thereafter to maintain "active" status.

## **Article VII**

The initial officer(s) and/or director(s) of the corporation is/are:

Title: P  
SANDRA M DELGADO  
15251 SW 56 TERRACE  
MIAMI, FL. 33193 US

Title: VP  
GUILLERMO OJEDA  
2110 SW 12 TERRACE  
CAPE CORAL, FL. 33991 US

## **Article VIII**

The effective date for this corporation shall be:

04/23/2024