

10/18/24, 5:01 PM

Division of Corporations

Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850)617-6381

From: Account Name : WEEZY SOLUTIONS LLC
Account Number : 120240000023
Phone : (407)818-3682
Fax Number : (409)204-6621

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

RECEIVED

2024 OCT 21 AM 9:25

DEPT. OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FLORIDA PROFIT/NON PROFIT CORPORATION
MINUTEFX CORP

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$70.00

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COVER LETTER

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

SUBJECT: MINUTEFX CORP

(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: JESSICA DIRINGER

Name (Printed or typed)

1878 Thetford Cir

Address

ORLANDO, FL 32824

City, State & Zip

407-8183682

Daytime Telephone number

info@weexyaccounting.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: MINUTEFX CORP

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

4111 LITTLE ROSE LANE 206

DAVENPORT, FL 33896

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: ANY AND ALL LAWFULL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: JHONATAN DE AMURIM QUEIROZ - P Name and Title: _____

Address 4111 LITTLE ROSE LANE 206 Address: _____

DAVENPORT, FL 33896 _____

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: WEEXY SOLUTIONS LLC

Address: 1878 THETFORD CIR

ORLANDO FL 32824

ARTICLE VII INCORPORATOR

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

Name: JHONATAN DE AMURIM QUEIROZ

Address: 4111 LITTLE ROSE LANE 206

DAVENPORT, FL 33896

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:

<u>JESSICA DIRINGER</u>	<u>Jessica Diringer</u>	<u>10/18/2024</u>
	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.

<u>Jhonatan de Amurim Queiroz</u>	<u>10/18/2024</u>
Required Signature/Incorporator	Date