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To:

Division of Corporations

3052201440

Fax Number : (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : 120000000019 Phone : (305)552-5973 Fax Number : (305)675-5944

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

Email Address:

FLORIDA PROFIT/NON PROFIT CORPORATION COLLAR MANAGER CORP

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

ARTICLES OF INCORPORATION In compliance with Chapter 607 (Profit)

ARTICLE 1 NAME: The name of the corporation is:
Collan Managen Corp. ARTICLE II PRINCIPAL OFFICE TO PRINCIPAL OFF
ARTICLE II PRINCIPAL OFFICE:
The principal street address and mailing address is:
5/70 E 10 COURT
- 5/70 E 10 COURT - HIA/EAH FL 33013
ARTICLE III SHARES: The number of shares of stock is:
Torge L Collan (P)
ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:
The name and Florida street address (PO Box not acceptable) of the registered agent is: 50R9E L. COLAR
HIATEAH FL 33013
HIATEAH FL 53018
APTICLE SIL DICOPPORT TO
ARTICLE VI INCORPORATOR: The name and address of the Incorporator is:
5/170 E 10 (010)
JORGE L COLLAR 5170 E 10 COURT HIALEAH EL 33013

Required Signatures:

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

Registred Agent 4.—19-21
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 \$2817.155. F.S.