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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CUMMINGS & LOCKWOOD, LLC

Account Number : 102336001100 Phone : (239)649-3101 Fax Number : (239)430-3344

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

Email Address:___clasp@cl-law.com

FOREIGN PROFIT/NONPROFIT CORPORATION MANNING OPAL COMPANY, INC.

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APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

	torporation; must include "INCORPORATED lorp," "Inc," "Co," or "Corp.")	O," "COMPANY," "CORPORATION,"	
(If name unavail	able in Florida, enter alternate corporate nam	e adopted for the purpose of transacting business in Florida)	
New York	3	13-2789802	
(State or count July 3, 1974	y under the law of which it is incorporated)	(FEI number, if applicable)	
(Date	of incorporation)	(Date of duration, if other than perpetual)	
	everde Way, Naples, FL 34119 (Prince Way, Naples, FL 34119	cipal office address)	
	(Current mai	ling address, if different)	
	et address of Florida registered agent: (P CLASP Inc.	P.O. Box NOT acceptable)	
Name:			
	3001 Tamiami Trail North, Suite 400		
Name: iffice Address:	3001 Tamiami Trail North, Suite 400 Naples		

9. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

My Bett Caynol
(Rogistered agent's signature)

10. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

A. DIRI	CTORS	
Chairman.		
Address:		
Vice Chai	man:	
		·
Di re ctor:	Gerald L. Manning	
	7399 Monteverde Way, Naples, FL 34119	
rucu css.		
S: 4	Darryl C. Manning	
	7399 Monteverde Way, Naples, FL 34119	
Address:		
	anna .	
B. OFF	Gerald L. Manning	2919
	7399 Monteverde Way, Naples, FL 34119	
Address: .		20,
	Darryl C. Manning	
lice Presi	dent:	<u> </u>
Address:		1
	Darryl C. Manning	
Secretary:	7399 Monteverde Way, Naples, FL 34119	
Address:	Gerald L. Manning	
(reasurer:	7399 Monteverde Way, Naples, FL 34119	
Address:	· · · · · · · · · · · · · · · · · · ·	
OTE: 1	f necessary, you may attach an addendum to the application listing additional officers at	nd/or directors.
2	Signature of Director or Officer	
he office	r or director signing this document (and who is listed in number 11 above) affirms that	the facts stated herei
	d that he or she is aware that false information submitted in a document to the Departm	

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State of New York Department of State } ss:

I hereby certify, that the Certificate of Incorporation of MANNING OPAL COMPANY, INC. was filed on 07/03/1974, with perpetual duration, and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is an existing corporation.

The Biennial Statement is past due.



2019 E. J. 26 T. T. 10: 47

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WITNESS my hand and the official seal of the Department of State at the City of Albany, this 21st day of November two thousand and nineteen.

Bradan Co Hydra

Brendan C Hughes
Executive Deputy Secretary of State