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DIVISION OF CURFORATIONIALLABAS EE FLORIDA

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÷1 ↓	In Compliance with Chapter 617, F.S., (Not for Profit)
	The name of the corporation shall be: MANUAL MANUAL MANUAL STATE The principal place of business and mailing address of this corporation shall be: P.O. WY 554 WOWNER FLORIDA 12362 1267 1268
	ARTICLE III PURPOSE The purpose for which the corporation is organized is: Emplifying without to be the with that God has walled us to be
	ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected or appointed: OCCUPANT TO HOLD DY- DWS
	ARTICLE V INITIAL DIRECTORS/OFFICERS The name(s), address(es) and title(s): Flux Normal 2200 S. Pandrole Ct. Talla FL 323 11 Normal Manuell Tr PO. Box 504 Working, R 32362
	The name and Florida street address of the registered agent is: The Name and Florida street address of the registered agent is: The Name and Florida street address of the registered agent is: The Name and Florida street address of the registered agent is:
	The name and address of the Incorporator is:
Hi in	**************************************