

**NO8000007352**

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

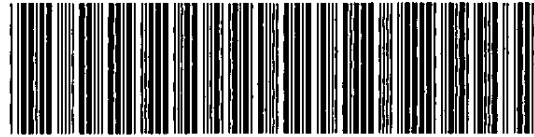
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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08/04/08--01056--007 \*\*78.75

**FILED**

**08 AUG -4 AM 10:59**

**SECRETARY OF STATE  
TALLAHASSEE, FLORIDA**

**AUG -5 2008  
D.A. WHITE**

## COVER LETTER

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

SUBJECT: COLTALLY, INC.  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is an original and one(1) copy of the Articles of Incorporation and a check for :

☐ \$70.00  
Filing Fee

☒ \$78.75  
Filing Fee &  
Certificate of  
Status

☐ \$78.75  
Filing Fee  
& Certified Copy

☐ \$87.50  
Filing Fee,  
Certified Copy  
& Certificate

ADDITIONAL COPY REQUIRED

FROM: Claudia Sullivan  
Name (Printed or typed)

2132 Glenridge Drive  
Address

Tallahassee, FL 32308  
City, State & Zip

850-878-7576  
Daytime Telephone number

NOTE: Please provide the original and one copy of the articles.

**ARTICLES OF INCORPORATION**  
In Compliance with Chapter 617, F.S., (Not for Profit)

**FILED**

**ARTICLE I NAME**

The name of the corporation shall be: Coltally, Inc.

08 AUG -4 AM 10: 59

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE II PRINCIPAL OFFICE**

The principal street address and mailing address, if different is:

3250 Carrollton Drive  
Tallahassee, FL 32311

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: to promote Colombian culture  
and to serve our community through our professionalism  
and solidarity.

**ARTICLE IV MANNER OF ELECTION**

The manner in which the directors are elected or appointed:

Appointed.

**ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS**

List name(s), address(es) and specific title(s):

Mana Patricia Jeans, President 3250 Carrollton Dr., Tall., FL 32311  
Manuel Avendano, Vice President 151 Bliss Dr., Apt. 1., Tall, FL 32310  
Claudia Sullivan, Treasurer 2132 Glennridge Dr., Tall., FL 32308  
Claudia Johns, Secretary 3356 Dry Creek Dr., Tall, FL 32309

**ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Mana Patricia Jeans 3250 Carrollton Drive  
Tallahassee, FL 32311

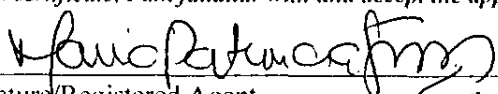
**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:


Claudia Sullivan  
2132 Glennridge Drive  
Tallahassee, FL 32308

\*\*\*\*\*

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.

  
Signature/Registered Agent

7/31/08  
Date

  
Signature/Incorporator

7/31/08  
Date