

PO1000102874

TRANSMITTAL LETTER

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

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-10/22/01--01079--014
*****78.75 *****78.75

C. P. Manager Inc.

SUBJECT: _____
(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
Filing Fee

\$78.75
Filing Fee
& Certificate

\$122.50
Filing Fee
& Certified Copy

\$131.25
Filing Fee,
Certified Copy
& Certificate

ADDITIONAL COPY REQUIRED

FROM:

Name (Printed or typed)

Xicotencal Garcilazo

Address

18751 N.E. 5th Street

City, State & Zip

Pembroke Pines, FL 33029

Daytime Telephone number

(786) 229-1200

FILED
01 OCT 22 AM 10:40
SECRETARY OF STATE
TALLAHASSEE FLORIDA

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

D. WHITE OCT 24 2001

FILED

ARTICLES OF INCORPORATION

OCT 22 AM 10:40

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

TALLAHASSEE FLORIDA

ARTICLE I NAME

The name of the corporation shall be: **C. P. Manager Inc.**

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

18751 N.E. 5th Street, Pembroke Pines, FL 33029

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

1,000 Shares

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent is:

**Xicotencal Garcilazo
18751 N.E. 5th Street
Pembroke Pines, FL 33029**

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

**Xicotencal Garcilazo
18751 N.E. 5th Street
Pembroke Pines, FL 33029**

✓

Signature/Incorporator

(An additional article must be added if an effective date is requested.)

✓

11/18/2001

Date

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

✓

Signature/Registered Agent

✓

11/18/2001

Date