# P02000034266

#### TRANSMITTAL LETTER

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



000005146300--8 -03/22/02--01043--016 \*\*\*\*\*78.75 \*\*\*\*\*\*78.75

SUBJECT: MANISON, INC.

(Proposed corporate name - must include suffix)

Enclosed is an original and (1) one copy of the Articles of Incorporation and a check for \$78.75

FROM:	GELBER AND COMPANY		
	Name		
	11450 INTERCHANGE CIRCLE NORTH		
	Address		
	MIRAMAR, FL 33025	02 MAR 22 SECKETAR ALLAHASS	
	City, State & Zip	Z AM	
	(954) 435-4222	8: 12 STATE 'LORIO/	O
	Daytime Telephone number		

#### ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be:

EFFECTIVE DATE

MANISON, INC.

## ARTICLE II - PRINCIPAL OFFICE

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

4993 SW 74<sup>TH</sup> COURT MIAMI, FL 33155

#### ARTICLE III SHARES

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

100

## ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

NIKOLAS ARVANITOPOULOS 4993 SW 74<sup>TH</sup> COURT MIAMI, FL 33155 02 HAR 22 AH 8: 12 SECRETARY OF STATE TALLAHASSIE, FLORIDA

# ARTICLE V INCORPORATOR

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

NIKOLAS ARVANITOPOULOS 4993 SW 74<sup>TH</sup> COURT MIAMI, FL 33155

# ARTICLE VI EFFECTIVE DATE

The effective date of this corporation shall be: MARCH 25, 2002

Signature Incorporator

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

Date

PILED

02 MAR 22 AM 8: 12

SECREJARY OF STATE
TALL ABACSET FLORING