DOZOOOS 4 793 TRANSMITTAL LETTER

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Department of State Division of Corporations

P.O. Box 6327 Tallahassee, FL 32314 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 **□** \$78.75 **□** \$78.75 \$87.50 Filing Fee Filing Fee Filing Fee Filing Fee, & Certificate of Status & Certified Copy Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED Ignacio Gira FROM: Name (Printed or typed) 305 206 136 Daytime Telephone number

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

¥ ,	ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit) ARTICLE I NAME The name of the corporation shall be:
	The name of the corporation shall be:
	MANACORE INC.
	The principal place of business/mailing address is: 50 Ocean Lane Dr. Apt W4 Key Biscayne, FL 33149 ARTICLE III PURPOSE The purpose for which the corporation is organized is:
	Distribution and retail of imported products.
	ARTICLE IV SHARES The number of shares of stock is: /0,000,000
	ARTICLE V INITIAL OFFICERS/DIRECTORS (optional) The name(s), address(es) and title(s):
	ARTICLE VI REGISTERED AGENT The name and Florida street address of the registered agent is: I anacio Giraldo 50 Ocean Lane Drive Apt 104 Key Biscayne, FL 33149 ARTICLE VII INCORPORATOR
	The name and address of the Incorporator is: I gnacio Giraldo SO Ocean Lave Dr Apt 104 ***********************************
	Signature/Registered Agent 5/10/02 Date
	Ni: 12 and 10 5 /10 /02

Signature/Incorporator

Date