

TRANSMITTAL LETTER 8 20000 59795

Department of State Division of Corporations P. O. Box 6327

Tallahassee, FL 323	314			
SUBJECT:		MAN COMPAN	r	
	(PROPOSED CORPORA	TE NAME – <u>MUST INCLUDI</u>	E SUFFIX)	_
		80	0005597 -05/22/02 ******78.75	01040009
Enclosed are an orig	inal and one (1) copy of the arti	icles of incorporation and a	check for:	-
\$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status	O 158
FROM:	XALPH Louis Name	ADDITIONAL COPY (Printed or typed)		SECRETARY OF ALLAHASSEE, F
-	890 N. Fel	deral Highway	suite 208	F STATE FLORIDA
-	Lantana, Fi	33462 State & Zip		
-	56/- 4/93 - Daytime T	- 92/0 elephone number	699	43628 32125
		F. OHE		
N	OTE: Please provide the or	iginal and one copy of the	2 A 4	974 H4938 A 34974



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

May 22, 2002

RALPH LOUIS COLEMAN 890 N FEDERAL HWY STE 208 LANTANA, FL 33462

SUBJECT: THE COLEMAN COMPANY

Ref. Number: W02000014938

We have received your document for THE COLEMAN COMPANY and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6904.

Freida Chesser Corporate Specialist New Filings Section

Letter Number: 602A00033060

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:	· · · · · · · · · · · · · · · · · · ·
Quality Life ENHANCEMENT CORPO	RAMON
ARTICLE II PRINCIPAL OFFICE	
The principal place of business/mailing address is: 890 N. Fede	eral Highway Suite 20
Lantana, FL 3	3462
ARTICLE III PURPOSE The purpose for which the corporation is organized is: To product the publication.	
The purpose for which the corporation is organized is:	ce and disseminate
gical health publications.	
ARTICLE IV SHARES	
The number of shares of stock is: / l, loo shares @	*/,000 per share
	TALE 02
ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)	LCRI A
The name(s), address(es) and title(s):	¥ HETA 3 APA
	O SSEX
	_
	ATH RID
ARTICLE VI REGISTERED AGENT	> '
The name and Florida street address of the registered agent is:	
Francine Coleman, 890 N. Federal	Highway Suite 208
Lantana, FI	33462
ARTICLE VII INCORPORATOR	
The name and address of the Incorporator is:	
Day ou lavie Coleman 890 N. FRO	loral Highway Suite 20
MARK Zours Coccinino	
RALAH LOUIS COLEMAN, 890 N. FED LANTANA, F	2. 33462
***********************	**********
Having been named as registered agent to accept service of process for the above stated certificate, I am familiar with and accept the appointment as registered agent and agree	corporation at the place designated in this to act in this capacity
Francisco Coleman	5/20/02 -
Signature/Registered Agent	Date
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