

P03000137685

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(Address)

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Special Instructions to Filing Officer:

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11/17/03--01079--009 \*\*70.00

## TRANSMITTAL LETTER

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

SUBJECT: MANERA, INC.  
(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 of Status

☐ \$78.75  
Filing Fee  
& Certified Copy

☐ \$87.50  
Filing Fee,  
Certified Copy  
& Certificate of  
Status

**ADDITIONAL COPY REQUIRED**

FROM: RONY BORGES GONCALVES  
Name (Printed or typed)

1222 N J ST  
Address

LAKE WORTH, FL 33460  
City, State & Zip

(561) 313-5849  
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:

MANERA, INC.

### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

1222 N J ST  
LAKE WORTH, FL 33460

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ANY AND ALL LAWFUL BUSINESS

### ARTICLE IV SHARES

The number of shares of stock is:

500

### ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

RONY BORGES GONCALVES - PRESIDENT  
1222 N J ST  
LAKE WORTH, FL 33460

MARY ASHBY GIRARD - VICE PRESIDENT/SEC/TRES  
1222 N J ST  
LAKE WORTH, FL 33460

### ARTICLE VI REGISTERED AGENT

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

RONY BORGES GONCALVES  
1222 N J ST  
LAKE WORTH, FL 33460

### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

MARY ASHBY GIRARD  
1222 N J ST  
LAKE WORTH, FL 33460

\*\*\*\*\*

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

11/10/03  
\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Signature/Incorporator

11/10/03  
\_\_\_\_\_  
Date

Article V: The names, address and titles of the Directors/Officers (**optional**). The names of officers/directors may be required to apply for a license, open a bank account, etc.

Article VI: The name and **Florida street address** of the initial Registered Agent. The Registered Agent **must** sign in the space provided and type or print his/her name accepting the designation as registered agent.

Article VII: The name and address of the Incorporator. The Incorporator **must** sign in the space provided and type or print his/her name below signature.

**An Effective Date:** Add a **separate** article if applicable or necessary: An effective date **may** be added to the Articles of Incorporation, otherwise the date of receipt will be the file date. (An effective date can not be more than five (5) business days prior to the date of receipt or ninety (90) days after the date of filing).

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**The fee for filing a profit corporation is:**

Filing Fee	\$35.00
Designation of Registered Agent	\$35.00
Certified Copy (optional)	\$ 8.75 (plus \$1 per page for each page over 8, not to exceed a maximum of \$52.50).
Certificate of Status (optional)	\$ 8.75

(Make checks payable to Florida Department of State)

**Mailing Address:**  
Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314  
(850) 245-6052

**Street Address:**  
Department of State  
Division of Corporations  
409 E. Gaines St.  
Tallahassee, FL 32399  
(850) 245-6052