(Re	equestor's Name)	
(Ac	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	· #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	

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SECRETARY OF STATE

FILING CANCELLED RETURNED CHECK

DEFALLATION OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

RECEIVED

770

COVER LETTER

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

SUBJECT:	MANZAND FIDOR (PROPOSED CORPORAT	ZING, INC.	
	(PROPOSED CORPORAT	E NAMÉ – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	ginal and one (1) copy of the artic	les of incorporation and	a check for:
☎ \$70.00	□ \$78.75	\$78.75	\$87.50
Filing Fee	Filing Fee	Filing Fee	
	& Certificate of Status	& Certified Copy	Certified Copy & Certificate of
			Status
		ADDITIONAL CO	PY REQUIRED
	,		-
FROM:	MANZANO Floorin	IG INC.	
PROM.	Name (Printed or typed)	
	2915 B GRADY	Rd.	
		ddress	
	TOU AUACCEE EI	21717.	
	TALLAHASSEE FL.	tate & Zin	
	Ony, s	uiv to zi.p	
	850559656		
	Daytime Tel	ephone number	
	MANZANO FIDORI	NG @ aol. com	
	MANZAND FIDORI E-mail address: (to be used	for future annual report n	otification)

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. (P	rofit) FILING CANCELLE	D
ARTICLE I NAME	RETURNED CHEC	K
The name of the corporation shall be: MANZANO FIDORING, INC.		
MANDANO PIDDEINA, INC.	ALL S	
	A REPORT OF THE PROPERTY OF TH	
ARTICLE II PRINCIPAL OFFICE	. Significant and the second s	
The principal street address and mailing address, if different is	i mi≺ ti	
2915 B GRADY Rd. TALLAHASSEE, FL. 32312.		
•		
ARTICLE III PURPOSE The purpose for which the corporation is organized is:	3	
ANY AND ALL LAWFUIL BUSINESS	. · · · · · · · · · · · · · · · · · · ·	
ARTICLE IV SHARES	•	
The number of shares of stock is:		
1000		
ARTICLE V INITIAL OFFICERS AND/OR DIRE	CTORS	
List name(s), address(es) and specific title(s): MARTIN MANZAND V. FRES	CRISTINA MANZAND PRE 2915B GRADY Dd. TALIAHASSEE F1. 32312	5
2915 B GRADY KA.	2915B GRADY Rd.	
TALLAHASSEE FI 32312	TALIAHASSEE E, 32312	
ARTICLE VI REGISTERED AGENT	". JUST	
The name and Florida street address (P.O. Box NOT accept	able) of the registered agent is:	
CRISTINA MANZANO 2915 B GRADY Rd.		
TALLAHASSE, FI 32312		
ARTICLE VII INCORPORATOR The name and address of the Incorporator is:		
CRISTINA MANZANO		
2915 B GRADY Ed. TALLAHASSEE, FI 32312	·	
TALLAHASSEE, FI 32312		
************	**********	
Having been named as registered agent to accept service of place designated in this certificate, I am familiar with and		
agree to act in this capacity		
Cait San	3/20/10	
UWane man		
Signature/Revistered Agent	$-\frac{3/30/10}{\text{Date}}$	
Signature/Registered Agent	Date	
Signature/Registered Agent Criting Mano Signature incorporator	Date 3/30/10 Date	