

P10000083575

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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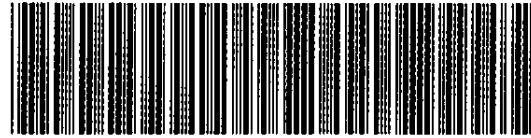
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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FILED  
OCT 12 PM 4:34  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

1. Dues OCT 13 2010

## COVER LETTER

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

**SUBJECT:** Mantesta Group 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:** a Carol Mantesta  
Name (Printed or typed)

a 4751 E. Moody Blvd. Suite B  
Address

a Bunnell, FL 32110  
City, State & Zip

a 386-437-0033  
Daytime Telephone number

a greenskeeperlawncare@live.com  
E-mail address: (to be used for future annual report notification)

**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:

Mantesta Group Inc.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

4751 E Moody Blvd. Suite B  
Bunnell, FL 32110

Mailing address, if different is:

Mantesta Group Inc. Carol Mantesta  
P.O. Box 350662  
Palm Coast, FL 32135

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Management and Consulting for Hair Care and Lawn Care Services

**ARTICLE IV SHARES**

The number of shares of stock is: 1000 Shares of Stock

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Carol Mantesta, President  
Address: 4751 E. Moody Blvd.  
Suite B  
Bunnell, FL 32110

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Name and Title: Carol Mantesta, Sec/Treas  
Address: 4751 E. Moody Blvd.  
Suite B  
Bunnell, FL 32110

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Carol Mantesta  
Address: 4751 E. Moody Blvd. Suite B  
Bunnell, FL 32110

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Carol Mantesta  
Address: 4751 E. Moody Blvd. Suite B  
Bunnell, FL 32110

*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*

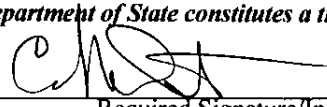


Required Signature/Registered Agent

10-5-10

Date

*I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.*



Required Signature/Incorporator

10-5-10

Date

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