## P11000000155

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SECRETARY OF STATE ALLAHASSEE, FLORIDA





## **COVER LETTER**

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

SUBJECT: MALEANA MANN, INC	C
(PROPOSED CORPORA	ATE NAME – <u>MUST INCLUDE SUFFIX</u> )
Enclosed are an original and one (1) copy of the art	ticles of incorporation and a check for:
\$70.00 Filing Fee & Certificate of Status	\$78.75 \$87.50  Filing Fee Filing Fee,  & Certified Copy Certified Copy  & Certificate of Status
	ADDITIONAL COPY REQUIRED
FROM: B.A. FLOWERS, INC/BE	VERLEE A. FLOWERS e (Printed or typed)
644 CESERY BOULEVA	ARD, SUITE 280 Address
JACKSONVILLE, FL 32 City	2211 , State & Zip
904-725-3677 Daytime	Telephone number
BAFLOWERS@BELLS( E-mail address: (to be use	OUTH.NET ad for future annual report notification)

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

December 29, 2010

Department of State Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

Re: Articles of Incorporation Maleana Mann, Inc.

Dear Sir/Madam,

Please see the attached Articles' of Incorporation for our client listed above. The clients have no intention of reinstating the prior corporation and wish to release the name above for immediate use.

I have enclosed the necessary payment for the new corporation.

Thank you for your help with this matter. Please contact me if you have any questions/concerns regarding this matter.

Sincerely,

Beverlee A. Flowers, E.A.

President

B.A. Flowers, Inc.

Enclosure: Articles of Incorporation

Check # 2037

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE II	PRINCIPAL OFFICE		
	Principal street address	Mailing addr	ess, if different is:
	35405 ALENE ROAD		
Ý	'ULEE, FL 32097		
-			
ARTICLE III	PURPOSE		
	hich the corporation is organized is:		
ANY AND AL	L BUSINESS		
			<b>ည</b> ်တ္က မ
			EIT, CO
			30 ASS
ARTICLE IV			H4""
The number of shar	res of stock is:1000 COMMON		
ADDICE DE	Himiat Afficenc Amon Denno	T075	STATE ORIDA
	INITIAL OFFICERS AND/OR DIRECT		
Address:	85405 ALENE ROAD	Address:	<del></del>
	YULEE, FL 32097		
		===	
Name and Ti	ALTIMOTE IN D. MANNE OVO		
Address:	tle: TIMOTHY D. MANN SVP 85405 ALENE ROAD		
Addiess.	YULEE, FL 32097	Address:	
	TOLLE, L UZUST		
		<del></del>	
Name and Tr	tle:	Name and Title:	
· Address:			
	REGISTERED AGENT		•
Name:	rida street address (P.O. Box NOT acceptab MALEANA B. MANN		
Address:	85405 ALENE ROAD		
riddiess.	YULEE FI 32097		
	INCORPORATOR		
	iress of the Incorporator is:		
Name: Address:	B.A. FLOWERS, INC.	<del></del>	
Address.	644 CESERY BLVD., STE. 28 JACKSONVILLE, FL 32211	<u>)                                    </u>	
	,		
Having been name	d as registered agent to accept service of pr	ocess for the above stated corporate	tion at the place designated in
ins verajicale, i an	n fumiliar with and accept the appointment a	s registerea agent ana agree to act t	n this capacity
1 /00	Bh have		11/10/10
$\sim_{\mid}\omega$	Required Signature/Registered Agent		
	required Signature Registered Agent		Date
I submit this docu	ment and affirm that the facts stated herein	are true. I am aware that the fal	se information submitted in a
document to the De	partment of State constitutes a third degree j	elony as provided for in s.817.155, i	F.S.
	1 // 1/ 1		
- Buu	w 6- 94 111		11/10/10
6	Required Signature/Incorporator		Date