

P11000000155

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

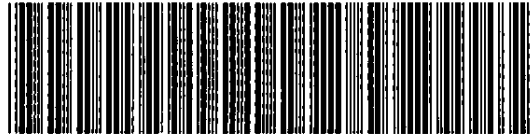
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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APPROVED
AND
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10 DEC 30 PM 1:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

VH

COVER LETTER

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

SUBJECT: MALEANA MANN, 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

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED	

FROM: B.A. FLOWERS, INC/BEVERLEE A. FLOWERS
Name (Printed or typed)

644 CESERY BOULEVARD, SUITE 280
Address

JACKSONVILLE, FL 32211
City, State & Zip

904-725-3677
Daytime Telephone number

BAFLOWERS@BELLSOUTH.NET
E-mail address: (to be used for future annual report notification)

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

B.A. Flowers Inc.

Licensed Tax Preparation & Representation • Small Business Planning & Bookkeeping Services

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 I NAME MALEANA MANN, INC.

The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE

Principal street address
85405 ALENE ROAD
YULEE, FL 32097

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
ANY AND ALL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is: 1000 COMMON

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: MALEANA B. MANN PTD
Address: 85405 ALENE ROAD
YULEE, FL 32097

Name and Title:
Address:

Name and Title: TIMOTHY D. MANN SVP
Address: 85405 ALENE ROAD
YULEE, FL 32097

Name and Title:
Address:

Name and Title:
Address:

Name and Title:
Address:

19 DEC 30 PM 1:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED AND FILED

ARTICLE VI REGISTERED AGENT

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

Name: MALEANA B. MANN
Address: 85405 ALENE ROAD
YULEE, FL 32097

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: B.A. FLOWERS, INC.
Address: 644 CESERY BLVD., STE. 280
JACKSONVILLE, FL 32211

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

Maleana B. Mann
Required Signature/Registered Agent

11/10/10
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

11/10/10
Date