P11000044559

(Requestor's Name)
,
(Address)
• •
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



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W11-23550



RECEIVED 11 HAY -9 PH 1:57 DIVISION OF CORFORATIONS

FLORIDA DEPARTMENT OF STATE Division of Corporations

April 27, 2011

JOHN E. MANTHEI 1845 CARDINAL DRIVE S CLEARWATER, FL 33760-1428

SUBJECT: VIPER BY JM ENTERPRISES, INC.

Ref. Number: W11000023550

We have received your document for VIPER BY JM ENTERPRISES, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The person designated as incorporator in the document and the person signing as incorporator must be the same.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6949.

Thomas Chang Regulatory Specialist II New Filing Section

Letter Number: 611A00010219

COVER LETTER

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

SUBJECT: VIPER BY JM ENTER	PRISES, INC.
(PROPOSED CORPORA	TE NAME – <u>MUST INCLUDE SUFFIX</u>)
Enclosed are an original and one (1) copy of the arti	cles of incorporation and a check for:
\$70.00 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy & Certificate of Status
	ADDITIONAL COPY REQUIRED
FROM: JOHN E. MANTHEI	e (Printed or typed)
1845 CARDINAL DRIVE	
,	Address
CLEARWATER, FL 33 City.	760-1428 State & Zip
727 536-0342 Daytime T	elephone number
JRONS@AOL.COM E-mail address: (to be use	d for future annual report notification)

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

ARTICLES OF INCORPORATION

4,

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

ARTICLE II	PRINCIPAL OFFICE		
	Principal street address	Mailing	address, if different is:
1	845 CARDINAL DRIVE S	<u>-,</u>	
Ω	LEARWATER, FL 33760		
_	<u> </u>		
RTICLE III			
he purpose for wi	hich the corporation is organized is:		75.
ANY AND AL	L LAWFUL PURPOSES		
			The state of the s
			Ser o francis
			1717.
RTICLE IV	<u>SHARES</u>		
he number of shar	es of stock is: 1,000 SHARES		
			D: LI
RTICLE V	INITIAL OFFICERS AND/OR DIRECTOR	<u>S</u>	DA —
	Ile: JOHN E. MANTHEI, PRESIDENT		
Address:	1845 CARDINAL DRIVE S		
	CLEARWATER, FL 33760	<u></u>	
		<u> </u>	
Name and Ti	tle:	Name and Title:	
Address:			
1 1 1 1			
	lle:		
Address:			
			
	REGISTERED AGENT		
ne <u>name and Floi</u> Name:	rida street address (P.O. Box NOT acceptable) of JOHN E. MANTHE!	the registered agent is:	
Address:	1845 CARDINAL DRIVE S	-	
Address.	CLEARWATER FL 33760	_	
	CLEARWATER, FL 33/BU	-	
RTICLE VII	INCORPORATOR		
he <u>name and add</u>	ress of the Incorporator is:		
Name:	JOHN E. MANTHEL	_	
Address:	1845 CARDINAL DRIVE S	_	
	CLEARWATER, FL 33760	_	
aving been name	d as registered agent to accept service of process	for the above stated corp	poration at the place designated
is certificate (1 an	of amiliar with and accept the appointment as regi	sterea agent ana agree to	act in this capacity
l d)	La Ella Tho	*	~/- [.
XII	Required Signature/Registered Agent		3/5 / // Date
submit this docur	nens, and affirm that the facts stated herein are	true. I am aware that the	e false information submitted in
submit his docur cument to the De		true. I am aware that the as provided for in s.817.1	e false information submitted in 155, F.S.