

P12000089636

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

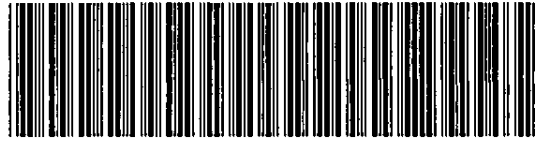
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400241127794

10/25/12--01002--004 **78.50

RECEIVED
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
2012 OCT 25 AM 9:53
NOT PLACED
TO ACKNOWLEDGE
SUFFICIENCY OF FILING

FILED
12 OCT 25 AM 10:25
TALLAHASSEE, FLORIDA

PS 10/25/12

COVER LETTER

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

SUBJECT: Manje La Vie, 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: Jason Eugene
(Name (Printed or typed))

1135 Apalachee Parkway
Address

Tallahassee FL 32301
City, State & Zip

754 422-3583
Daytime Telephone number

Jason.eugene1@yahoo.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: Mange la Vie, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address
1135 Apalachee Parkway
Tallahassee FL 32301

Mailing address, if different is:
TALLAHASSEE, FLORIDA

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12 OCT 25 AM 10:25

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

resturant

ARTICLE IV SHARES

The number of shares of stock is. 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: <u>Jason Eugene President</u>	Name and Title: _____
Address: <u>3679 NW 43rd PL</u>	Address: _____
<u>Lauderdale Lakes FL</u>	_____

Name and Title: <u>Oliver Compere - Director</u>	Name and Title: _____
Address: <u>3679 NW 43rd PL</u>	Address: _____
<u>Lauderdale Lakes FL 33309</u>	_____

Name and Title: _____	Name and Title: _____
Address: _____	Address: _____
_____	_____

ARTICLE VI REGISTERED AGENT

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

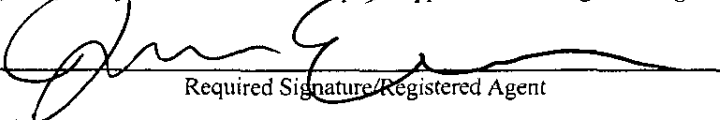
Name: Jason Eugene
Address: 1135 Apalachee Parkway
Tallahassee FL 32301

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

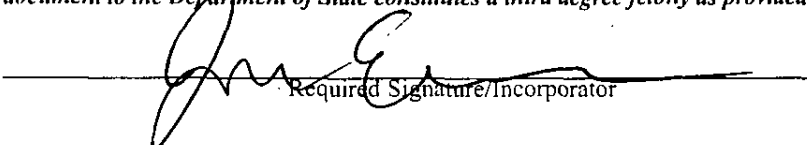
Name: Jason Eugene
Address: 1135 Apalachee Parkway
Tallahassee FL 32301

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

10-25-2012
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

10-25-2012
Date