## P12000090670

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

Office Use Only



500240905375

10/25/12--01030--031 \*\*140.00

PILED

12 OCT 25 PH 1: 1

SECRETARY OF STATE
SECRETARY OF STATE

## SALPETER GITKIN, LLP

Attorneys at Law

October 24, 2012

Via Federal Express Tracking #7939 2190 1813

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

RE: Stud Manning, Inc. – Articles of Incorporation & Articles of Merger

To Whom It May Concern:

Enclosed please find the following documents for processing and recording:

- 1. Originally Executed Articles of Incorporation for Stud Manning, Inc.
- 2. Originally Executed Articles of Merger with Agreement and Plan of Merger.
- 3. Check #3600 in the amount of \$140.00 representing the fees for the Articles of Incorporation and Articles of Merger.

To the extent you should have any questions or comments, please do not hesitate to contact me.

Very truly yours,

Eric T. Salpeter For the Firm

ETS/sd Enclosures

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

ARTICLE I	NAME STUD MANNING, INC.		
The name of the co	orporation shall be:		
ARTICLE II	PRINCIPAL OFFICE		
	Principal street address	Mailing ac	ddress, if different is:
•	17201 Collins Avenue		
	Suite 2507		
\$	Sunny Isles Beach, FL 33160	<u> </u>	
ARTICLE III	PURPOSE		
	which the corporation is organized is: awful business		
ARTICLE IV	<u>SHARES</u> tres of stock is: 1000 Shares, No Par Value	Per Share	
The number of sha	ites of stock is. 1000 Offares, 1401 at Value	or er oriale	
	INITIAL OFFICERS AND/OR DIRECTORS		
Address:	itle: William Saba, President & Director 17201 Collins Avenue	Address:	
	Suite 2507 Sunny Isles Beach, FL 33160		
Name and T	itle:	Name and Title:	· · · · · · · · · · · · · · · · · · ·
Address:			
			-
Name and Title: Na		Name and Title:	SE Z
Address:		Address:	트워
			# B 7
			(0.59 N)
ARTICLE VI	REGISTERED AGENT		(T) (-)
The <u>name and Flo</u>	orida street address (P.O. Box NOT acceptable) of t	he registered agent is:	
Name:	Sergio Ripamonti	•	53 <b>=</b> 0
Address:	17201 Collins Avenue Suite 2507		PH 1: 1 PH 1: 1 )F STATE , FLORIDA
	Sunny Isles Beach, FL 33160		D , ,
ARTICLE VII	INCORPORATOR		
The <u>name and add</u>	dress of the Incorporator is:		
Name:	William Saba, President & Director		
Address:	17201 Collins Avenue Suite 2507 Sunny Isles Beach, FL 33160		
Having been nam this certificate, I a	ed as registered agent to accept service of process m familiar with and accept the appointment as regis	for the above stated corpo tered agent and agree to a	ration at the place designated in ct in this capacity
-	Mol		_
			October 24, 2012 Date
	Required Signature/Registered Agent		Date
I submit this docu	uplent and affirm that the facts stated herein are t	rue. I am aware that the	false information submitted in a
	epartment of State constitutes a third degree felony		
	1/2/2/		
	young		October 24, 2012
	Required Signature/Incorporator		Date