## P14000078923

(Re	equestor's Name)			
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- 09/24/14

## **COVER LETTER**

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

SUBJECT:	(PROPOSED CORPORA	MANA DE MENT SOLUTIONS. INC.			
Enclosed are an	original and one (1) copy of the art	ticles of incorporation and a check for:			
☐ \$70.6 Filing Fo					
FROM: DANICK DUMAS					
Name (Printed or typed)  5037 SW 28W					
Address  Fort-lauderlaliz, Florida 33312  City, State & Zip					
	78697	Cal 5333			
	DANICKT	DUMAS 1 @ Gol. Come and 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)

The name of the corpora	tion shall be: $\sum \sum E $	Zim SPAUAL	2 UI. Zueituloc
ARTICLE II PRI	NCIPAL OFFICE Principal <u>street</u> address	Mailing ad	dress, if different is:
インノナ	200 38 NO	5037	48 SWZ
	DdeRdAla	FORT . I	Andre Rd Alve
Abisadit	27319	Absacti	33319
ARTICLE III PUR The purpose for which t	POSE the corporation is organized is:	LANAZZMENT	
			15 S
			SP 28
ARTICLE IV SHA The number of shares of			10 8 8 25 10 9 10 4
ARTICLE V INIT	TIAL OFFICERS AND/OR DIRECT	(3)~	Tushie
Address	71555 april 2005 2034 2098 2034 2098 2034 2098	<del>Addre</del> ss:	
Name and Title	·	Name and Title:	
Address		Address:	
		<del></del>	
Name and Title		Name and Title:	
Address		Address:	

Name and Title: Name and T	`itle:
Address Address:	
-	
RTICLE VI REGISTERED AGENT  he name and Florida street address (P.O. Box NOT acceptable) of the registered	agent is:
Name: DANICK DUMAS	
x277 < 117 1 W	
Address: 303 + 300 &8"	
FOOT MODERALE TI 53312	
RTICLE VII INCORPORATOR	
Shows and the state of the same of the sam	i zuostoloz Turm o en
	11. ZUOTOLOCIUSMOLAC
Name: DANICK DUMAS	
Address: 5037 Ju 28m	
EIEEE , 17 MADREDOAD. FOOT	_
laving been named as registered agent to accept service of process for the above is certificate, I am familiar with and accept the appointment as registered agent	and agree to act in this capacity
Required Signature/Registered Agent	<u> </u>
	···
submit this document and affirm that the facts stated herein are true. I am aw ocument to the Department of State constitutes a third degree felony as provided	
	111.01-100
Required Signature/Incorporator	Date
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