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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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From:
Account Name : CORP 911, INC.
Account Number : I20200000202
Phone : (818)478-1681
Fax Number : (818)688-8120

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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FLORIDA PROFIT/NON PROFIT CORPORATION

NewMancini Management, Inc.

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	$78.75

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 21, 2021

CORP 911, INC.

SUBJECT: NEWMANCINI MANAGEMENT
REF: W21000126936

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

DANIEL L O'KEEFE
Regulatory Specialist II

FAX Aud. #: H21000296758
Letter Number: 121A00022746

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ALLAHASSEE, FLORIDA

H21000294753

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: NewMancini Management, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address: 101 S. Old Coachman Road, #106.
Clearwater, FL 33765

Mailing address, if different is:

ARTICLE III PURPOSE
The purpose for which the corporation is organized is: To engage in any lawful act or activity for which a corporation may be organized under the laws of the state of Florida.

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TALLAHASSEE, FLORIDA

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ARTICLE IV SHARES
The number of shares of stock is: 1,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Louis J. Mancini, President
Address: 101 S. Old Coachman Rd., #106
Clearwater, FL 33765

Name and Title:
Address:

Name and Title: Geraldine H. Newman, Secretary
Address: 101 S. Old Coachman Rd., #106
Clearwater, FL 33765

Name and Title:
Address:

Name and Title: Geraldine H. Newman, Treasurer
Address: 101 S. Old Coachman Rd., #106
Clearwater, FL 33765

Name and Title:
Address:

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H21000296750 5

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: Louis Mancini

Address: 101 S. Old Coachman Rd., #106

Clearwater, FL 33765

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TALLAHASSEE, FLORIDA

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Louis Mancini

Address: 101 S. Old Coachman Rd., #106

Clearwater, FL 33765

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____. (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

Louis Mancini August 5, 2021

Required Signature/Registered Agent 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.

Louis Mancini August 5, 2021

Required Signature/Incorporator Date

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