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DIVISION OF CONFORMING. 22 OCT 21 AH 9: 45

ALLAHASSEE, FLOREN

RECEIVED

Sunshine State Corporate Compliance Company

3458 Lakeshore Drive Tallahassee, Florida 32312 (850) 656-4724

**WALK INSENTITY NAME MANNY SCHVARTZMAN PRODUCTIONS, INC.						
DOCUMENT NUMB	ER					
	PLEASE FILL	E THE ATTACHED AND RETURN				
xxxxxx	Plain Copy					
	Certified Copy					
	Certificate of Stata	of the state of th				
	PLEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY Certified Copy of Arts & Amendments Certified Copy of Arts & Amendments Complete File (Inclading Annaal Reports) Certificate of Statas Certificate of Statas Reflecting:					
	APOSTILLE	'/NOTARIAL CERTIFICATION				
COUNTRY OF DESTI	NATION					
NUMBER OF CERTIF	 					
TOTAL OWED \$ 70	.00	ACCOUNT # 120140000108 United Corporate Services, Inc. Trang issues or concerns, Thank you so much!				

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

ARTICLE I NAME The name of the corporat	ion shall be:	Manny Schvartzman P	roductions Inc.		
ARTICLE II PRINC	IPAL OFFICE Principal street a	ddress		Mailing address	s, if different is:
2075 NE 171 ST North Miami Beac	h, FL 33162				
ARTICLE III PURPO The purpose for which the	ne corporation is				
This corporation is fort	med to engage in	any lawful act or activ	vity for which corpor	ations may be o	organized under the Busine
Corporation Law of th	e State of Florid	a			
					22 0C
					REIGHT NOTE
ARTICLE <u>IV</u> SHARE	·e				AH 9: 45
	L OFFICERS A	o Par Value ND/OR DIRECTORS			Ĩñ
Name and Title	Emmanuel Sch	vartzman, President	Name and Title	<u> </u>	
Address	2075 NE 171 S	···	Address:		<u> </u>
	North Miami I	Beach, FL 33162			
Name and Title:		-	Name and Title	···	
Name and Title:				: <u> </u>	
Address					
					·

Name and Title:		Name and Title:		
· Address		Address:		
	REGISTERED AGENT lorida street address (P.O. Box NOT accepta	ible) of the registered agent is:		
Name:	Emmanuel Schvartzman			
Address:	2075 NE 171 ST			
	North Miami Beach, FL 33162	<u> </u>		
		DIVISION 22 OCT		
ARTICLE VII	<u>INCORPORATOR</u>	7 2 OHE		
The <u>name and a</u>	ddress of the Incorporator is;			
Name:	Emmanuel Schvartzman			
Address:	2075 NE 171 ST	9: 5		
	North Miami Beach, FL 33162			
ARTICLE VIII	EFFECTIVE DATE:			
Effective date, if	other than the date of filing:	(OPTIONAL)		
(If an effective (filing.)	date is listed, the date must be specific and	cannot be more than five days prior or 90 days after the		
		licable statutory filing requirements, this date will not be listed as		
the document's o	effective date on the Department of State's re	cords.		
Having been nan	ned as registered agent to accept service of pro	ocess for the above stated corporation at the place designated in this		
certificate, I am j	familiar with and accept the appointment as r	egistered agent and agree to act in this capacity		
	Cambo	10/30/2022		
	Required Signature/Registered Ages	nt Date		
	cument and affirm that the facts stated here. Department of State constitutes a third degree	in are true. I am aware that the false information submitted in a felony as provided for in s.817.155, F.S.		
,	1	10/20/22		
	redingernorator			