

P1200002096

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

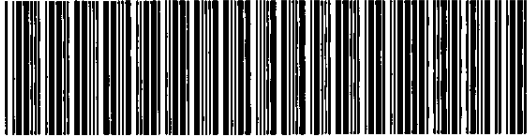
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
12 JAN -6 PM 1:31

Ps 2/9/12

COVER LETTER

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

SUBJECT: Red Barn Sales, 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

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED	

FROM: Tamar Schreiner
Name (Printed or typed)

8363 SW 144 Street
Address

Palmetto Bay, FL 33158
City, State & Zip

305-238-1606
Daytime Telephone number

Schreineri@bellsouth.net
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)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS

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ARTICLE I NAME Red Barn Sales, Inc
The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE
Principal street address
8363 SW 144 Street
Palmetto Bay, FL 33158

Mailing address, if different is:

ARTICLE III PURPOSE
The purpose for which the corporation is organized is:
Any legal and lawful business purposes.

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

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: <u>Tamar Schreiner</u>	Name and Title: _____
Address: <u>8363 SW 144 Street</u>	Address: _____
<u>Palmetto Bay, FL 33158</u>	_____
_____	_____
Name and Title: _____	Name and Title: _____
Address: _____	Address: _____
_____	_____
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: InCorp Services, Inc
Address: 17888 67th Court North
Loxahatchee, FL 33470

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:
Name: Tamar Schreiner
Address: 8363 SW 144 Street
Palmetto Bay, FL 33158

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

Tamar Schreiner on behalf of InCorp Services, Inc 12/13/2011
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.

Tamar Schreiner 12-13-11
Required Signature/Incorporator Date