

P15000016868

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

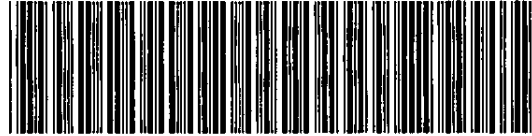
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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2015 FEB 17 PM 1:05  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2/23/15

**COVER LETTER**

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

**SUBJECT:** Red Creek Holdings 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

\$78.75  
Filing Fee  
& Certified Copy

\$87.50  
Filing Fee,  
Certified Copy  
& Certificate of  
Status

**ADDITIONAL COPY REQUIRED**

**FROM:** Luis Figueredo

Name (Printed or typed)

8455 SW 158th Street

Address

Miami, FL 33157

City, State & Zip

786 393-8088

Daytime Telephone number

lfigueredolaw@gmail.com

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)

**ARTICLE I NAME** Red Creek Holdings Inc.  
The name of the corporation shall be: \_\_\_\_\_

**ARTICLE II PRINCIPAL OFFICE**  
Principal street address \_\_\_\_\_ Mailing address, if different is: \_\_\_\_\_  
8455 SW 158th Street \_\_\_\_\_  
Miami, Fl 33157 \_\_\_\_\_  
\_\_\_\_\_

**ARTICLE III PURPOSE** Development and holding company.  
The purpose for which the corporation is organized is: \_\_\_\_\_

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**ARTICLE IV SHARES** 100  
The number of shares of stock is: \_\_\_\_\_

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title:	<u>Luis Figueredo President</u>	Name and Title:	<u>Shane Rolls CEO</u>
Address	<u>8455 SW 158th Street</u>	Address:	<u>8409 St. Johns Ct.</u>
	<u>Miami Fl 33157</u>		<u>Wellington Fl 33414</u>

Name and Title:	<u>Justin Rolls Vice President</u>	Name and Title:	_____
Address	<u>1800 W. Albany Drive</u>	Address:	_____
	<u>#1011</u>		_____
	<u>Broken Arrow, Ok 74012</u>		_____

Name and Title:	<u>Toni Figueredo Secretary</u>	Name and Title:	_____
Address	<u>8455 SW 158th Street</u>	Address:	_____
	<u>Miami Fl 33157</u>		_____

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: Luis Figueredo

Address: 8455 SW 158th Street  
Miami Fl 33157

**ARTICLE VII INCORPORATOR**

The **name and address** of the Incorporator is:

Name: Luis Figueredo

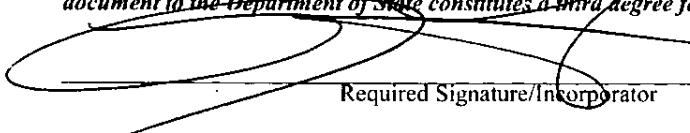
Address: 8455 SW 158th Street  
Miami, Fl 33157

*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*

  
\_\_\_\_\_  
Required Signature/Registered Agent

2/10/15  
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.*

  
\_\_\_\_\_  
Required Signature/Incorporator

2/10/15  
Date