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(Red	uestor's Name)			
(Address)				
(Add	iress)			
(City	/State/Zip/Phone	#)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates	of Status		
Special Instructions to Filing Officer:				
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WH4-9	53/			

Office Use Only



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2014 MAR 17 PM 2- 26

VK

COVER LETTER

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

SUBJECT: RED EVED SNAPPONS TWOTES

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is 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

\$87.50

Filing Fee

Filing Fee,

& Certified Copy

Certified Copy

& Certificate

ADDITIONAL COPY REQUIRED

FROM: Kasheene Kenderck

2060 NW 28TH AVE

MDAMI CANDED S FL. 33056-1408 City, State & Zip

(786) 295-8971

Daytime Telephone number

E-mail address: (to be used for future annual report notification)

13-man address. (to be discurred future alimular report notification)

NOTE: Please provide the original and one copy of the articles.



February 13, 2014

KATHERINE KENDRICK 20601 NW 28TH AVE MIAMI GARDENS, FL 33056-1408

SUBJECT: RED EYED SNAPPERS TURTLES

Ref. Number: W14000009531

We have received your document for RED EYED SNAPPERS TURTLES and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

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.

The purpose contained in your articles of incorporation should be more specific. Please correct your articles to reflect the specific purpose for which the non profit corporation is being organized.

You must list at least one incorporator with a complete business street address.

Section 607.0120(6)(b), or 617.0120(6)(b), Florida Statutes, requires that articles of incorporation be executed by an incorporator.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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

Valerie Herring Regulatory Specialist II New Filing Section

Letter Number: 014A00003300

ARTICLES OF INCORPORATIONIn compliance with Chapter 617, F.S., (Not for Profit)

ARTICLE I NAME The name of the corporation shall be: PEB EXE	ED SNAPPERS THETHER (OR	ρ.
ARTICLE II PRINCIPAL OFFICE		
Principal street address: ZOBOL NW ZOTA AUE	Mailing address, if different is:	
MOANT CAREBONE FL. 3	3056-1408	
Between AND Anound IND	STOTAL OROTATION PATTOEN OF VODUAL AND CHROUP LEADER	stip,
ARTICLE IV MANNER OF ELECTION The OF VOTES WHO OFFICE OFFICERS AND/OR I		MAJORITY
Name and Title: BOOTE & - KENPELL JR - PRESTRE	Name and Title: JAMONICA LAWKENCE - VIC	EINESINES
	Address: 15860 NW 41 = ME 3056	- - ·
	suele	SECRET
Address 20601 NW 28TH AND MORME CONCERNS PL 330		ERLEU F GORFE
Name and Title: Address		2: 30
		-

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	- -	<i>;</i>	-
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Name and Title:_		_ Name and Title:	A A Compa
Address		Address:	DIVISION OF GROUP STATE
_			2014 MAR 17 PM 2: 30
_		-	
Name and Title:		Name and Title:	
Address		_ Address:	
_		-	
ARTICLE VI	REGISTERED AGENT rida street address (P.O. Box NOT acce	entable) of the registered a	ment ic
Name:	Komeenc Kend		gent is.
	20601 m 32	^Ave	
Address:		3056	
	Mian, It 3	<u>303</u> \$	
ARTICLE VII	INCORPORATOR		
	Iress of the Incorporator is:	/ 10	
Name:	EDUTE OF KINDRICK 2060 NW 28TH +	<u> </u>	
Address:			
	MANNI PL 3308	P	
Having been nam	ed as registered agent to accept service	of process for the above	stated corporation at the place designated in th
certificate, I am fa	miliar with and accept the appointment o	as registered agent and ag	gree to act in this capacity
- Ka	setting the	uce	1-16-14 Date
I ouhmit thin do	Required Signature of Registered	J	
to the Department	nent and affirm that the facts stated her of State constitutes a third degree felony	ein are true. I am aware i as provided for in s.817.	that any false information submitted in a docume 155, F.S.
Elelie	Is Vembuck =	TR	3-9-14
	Required Signature of Inco	rporator	Date