TRANSMITTAL LETTER

P. O. Box 6327
Tallahassee, FL 32314

SUBJECT: RED WAGON CORP.

(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
Filing Fee
& Certified Copy

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

ADDITIONAL COPY REQUIRED

FROM: Thomas Brannon
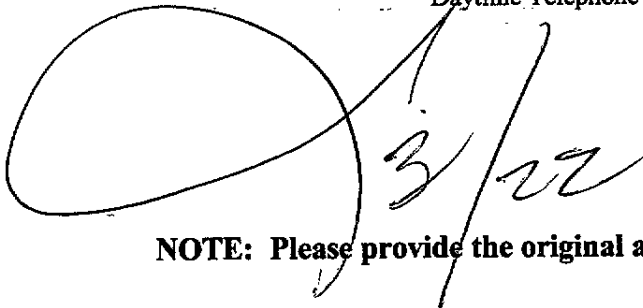
Name (Printed or typed)

1888 N.W. 112ter.

Address

Miami Fl. 33167

City, State & Zip

(305) 498-5617 or (305) 685-3624

Daytime Telephone number

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

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00 MAR 16 PM 3:36
SECRETARY OF STATE
TALLAHASSEE FLORIDA

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I   NAME
The name of the corporation shall be:
RED WAGON CORP.

ARTICLE II   PRINCIPAL OFFICE
The principal place of business and mailing address of this corporation shall be:
1888 N.W. 112 ter. Miami Fl. 33167

ARTICLE III   SHARES
The number of shares of stock that this corporation is authorized to have outstanding at any one time is:
500,000

ARTICLE IV   INITIAL REGISTERED AGENT AND STREET ADDRESS
The name and Florida street address of the initial registered agent are:
Thomas Brannon 1888 N.W. 112 ter. Miami Fl. 33167

ARTICLE V   INCORPORATOR
The **name and address** of the incorporator to these Articles of Incorporation are:

Thomas Brannon 1888 N.W. 112 ter. Miami Fl. 33167

_____   03/14/00
Signature/Incorporator   **Date**

(An additional article must be added if an effective date is requested.)

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

_____   03/14/00
Signature/Registered Agent   **Date**