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To:

Division of Corporations

Fax Number : (850) 205-0381

From:

Account Name : STANLEY A. GCLDSMITE, ATTORNEY AT LAW

Account Number : I20000000063 Phone : (941)955-4990 Fax Number : (941)955-4997

# FLORIDA PROFIT CORPORATION OR P.A.

RiversEdge Art Glass, Inc.

Certificate of Status	1
Certified Copy	0
Page Count	02
Estimated Charge	\$78.75

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## ARTICLES OF INCORPORATION

of

RiversEdge Art Glass, Inc.

The name of the Corporation shall be RiversEdge Art Glass, Inc. The principal mailing address of the corporation is 1605 Main Street, Suite 1001, Sarasota, Florida 34236.

The purposes for which the corporation is formed are any and all lawful purposes for which a corporation may be formed pursuant to the laws of the State of Florida and the United States.

# THIRD:

The corporation shall be authorized and empowered to issue TEN THOUSAND (10,000) shares of common stock.

# FOURTH:

Each shareholder of any class of stock of this corporation shall be entitled to full preemptive rights to purchase any unissued or treasury shares of the corporation.

# FIFTH:

The mailing address of the Registered Office of the Corporation is 1605 Main Street, Suite 1001, Sarasota, Florida 34236.

# SIXTH

The Registered Agent for the Corporation shall be:

STANLEY A. GOLDSMITH 1605 Main Street, Suite 1001 Sarasota, Florida 34236

# SEVENTH

To the Incorporator of RiversEdge Art Glass, Inc.

I understand my obligations as your Registered Agent and hereby accept appointment as your

Registered Agent in accordance with F.S. 48.091.

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## EIGHTH:

The initial Board of Directors of the corporation shall consist of two (2) members:

STEVE L. ROBERTS 717 Brentwood Drive Venice, FL 34292 TERRI A. ROBERTS 717 Brentwood Drive Venice, FL 34292

### NINTH

The Incorporator of Rivers Edge Art Glass, Inc., who by his signature hereby acknowledges the adoption of these Articles of Incorporation, is:

STEVE L. ROBERTS
717 Breniwood Drive
Venice, FL 34292

STATE OF FLORIDA ) COUNTY OF SARASOTA ) ss:

The foregoing Articles of Incorporation of Rivers Edge Art Glass, Inc., were acknowledged before me this 22 day of 12 (ember 2003 by Stanley A. Goldsmith, as Registered Agent. He is personally known to me or has produced N/A as identification and did not take an oath. If no type of identification is indicated, the above-named person is personally known to me.



Signature of Notary Public

Print Name of Notary Public
I am a Notary Public of the State of
Florida, and my commission
expires on Oto ac 30 300

STATE OF FLORIDA )
COUNTY OF SARASOTA ) ss:

STANLEY A GOLDSMITH
MY COMMISSION # DO 268875
EXPIRES; December 13, 2007
Benied The Newsy Public Undervisors

Print Name of Notary Public
I am a Notary Public of the State of
Florida, and my commission
expires on

SECRETARY CE STATE