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| (Requestor's Name) |
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| (City/State/Zip/Phone #) |
| |
| PICK-UP WAIT MAIL |
| |
| (Business Entity Name) |
| |
| (Document Number) |
| (Social Francis) |
| Certified Copies Certificates of Status |
| Columbia Colored Color |
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| Special Instructions to Filing Officer: |
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Office Use Only

192-2553-621 WOY-27103



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87/09/04--01019--017 **78.75

2004 AUG 19 AM 10: 49

or 8/20/04

TRANSMITTAL LETTER

TILLL

Department of State
Division of Corporations

2004 AUG 19 AM 10: 49
TALLAHASSEE FLORIDA

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

| SUBJECT: | Redpocket | Inc. | |
|-------------------------|--|--|--|
| Enclosed are an orig | (PROPOSED CORPORA) | TE NAME - MUST INCL | |
| ☐ \$70.00 Filing Fee | \$78.75 Filing Fee & Certificate of Status | \$78.75 Filing Fee & Certified Copy ADDITIONAL CO | \$87.50 Filing Fee, Certified Copy & Certificate of Status |
| FROM: | 701 SU | OPTING. (Printed or typed) J 12th AVE Address | |
| | | F1a 333 State & Zip | 31 <u>2</u> 54 763 7856 |

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

Daytime Telephone number



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

2004 AUG 19 AM 10: 49
TALLAHASSEE FLORIDA

July 15, 2004

REDPOCKET INC. 701 SW 12TH AVENUE FORT LAUDERDALE, FL 33312

SUBJECT: REDPOCKET INC. Ref. Number: W04000027103

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

Please list the street address of each officer/director.

The document must contain a registered agent with a Florida street address and a <u>signed</u> statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

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 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) 245-6973.

Claretha Golden Document Specialist New Filings Section

Letter Number: 804A00045153

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|--|--------------------------------------|
| ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit) | トルニレ |
| ARTICLE I NAME The name of the corporation shall be: | 2004 AUG 19 AM 10: 49 |
| Redpocket Inc. | TALLAHASSEE FLORIDA |
| ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: | |
| 701 SW 12th AVE F+ LAND F19. | |
| ARTICLE III PURPOSE The purpose for which the corporation is organized is: | |
| Clothin q | |
| The number of shares of stock is: 100 Shares held | d by Patricia K. Keen |
| ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(cs) and specific title(s): | |
| Patricia K. Keen President 701 SW 12th AVE Pt. Caro Fla. 33312 | |
| ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the | e registered agent is: |
| 701 SW 12th XVE Patricia K. Keen | - - |
| ARTICLE VII INCORPORATOR The name and address of the Incorporator is: | |
| Patricia K. Keen 701 SW 12th Avenue Fort Lauderdale, FL 33312 | |
| ************************************** | |
| certificate, I am familiar with and accept the appointment as registered agent and agr | tee to act in this capacity $7/7/24$ |
| Signature/Registered Agent | Date 7 /27 /05 /Date |
| Signature/Incorporator | Date |